



# Housing Program Participant Satisfaction Survey

Dear Housing Participant,

In order to run the Continuum of Care's housing programs more effectively, it helps us to know what you think works well and what doesn't.

This survey is anonymous and optional; you are not required to complete this form as part of your recertification process. Please fill in the following before proceeding with the survey:

1. I live in the following county:

- |                                   |                                   |                                     |
|-----------------------------------|-----------------------------------|-------------------------------------|
| <input type="checkbox"/> Apache   | <input type="checkbox"/> Greenlee | <input type="checkbox"/> Pima       |
| <input type="checkbox"/> Cochise  | <input type="checkbox"/> La Paz   | <input type="checkbox"/> Pinal      |
| <input type="checkbox"/> Coconino | <input type="checkbox"/> Maricopa | <input type="checkbox"/> Santa Cruz |
| <input type="checkbox"/> Gila     | <input type="checkbox"/> Mohave   | <input type="checkbox"/> Yavapai    |
| <input type="checkbox"/> Graham   | <input type="checkbox"/> Navajo   | <input type="checkbox"/> Yuma       |

2. I have received a rental subsidy for:

- |  |  |
|--|--|
| <input type="checkbox"/> One year            | <input type="checkbox"/> Five or six years   |
| <input type="checkbox"/> Two years           | <input type="checkbox"/> Six to ten years    |
| <input type="checkbox"/> Three or four years | <input type="checkbox"/> More than ten years |

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## SURVEY

For each item below, please indicate whether you agree or disagree with the statement, or have no opinion.

	Agree	No Opinion	Disagree
I have access to case management or other similar assistance from my mental health or behavioral health services provider when I need it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I know who to contact when I have issues or problems related to my landlord or rental unit.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My rental unit is safe, decent and adequate to my housing needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Since I have been housed I have been able to increase my income through employment or through assistance programs such as social security.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I had adequate help from my case manager and from the staff of the housing agency while looking for a rental unit.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have been treated with respect and dignity by the agencies that have helped me to get housed once more.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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*Thank you for your time.*