

MARION SUPERIOR COURT PROBATION DEPARTMENT – JUVENILE SERVICES DIVISION
Probation Satisfaction Survey
PARENT VERSION

Name (optional): _____

Date: _____

1. Who was your child's probation officer at the time the case was closed? _____
2. How many PO's did your child have during the time he/she was on probation? _____
3. What location did you report to most often?
 Juvenile Court Building School: _____
 Southside Office (Madison & Hanna) Other: _____
 Northeast Office (Shadeland Avenue)
4. Was the Reception staff respectful and courteous to you when you reported?
 Always or usually Sometimes Never or rarely
5. When your child first began supervision, were requirements explained to you so you could understand them?
 Yes No

The following questions should be answered about your child's assigned probation officer at the time the case was closed.

6. Was your child's probation officer respectful and courteous to you?
 Always or usually Sometimes Never or rarely
7. Was your child's probation officer helpful and knowledgeable about resources in the community?
 Yes No
8. Did your child's probation officer encourage your participation in your child's supervision plan?
 Yes No
9. Did the probation officer meet your child's needs while on supervision?
 Yes
 No If not, what needs were not addressed? _____

10. Did the probation office conduct field visits in a professional and respectful manner?
 Yes No I did not have interaction with the probation office outside of an office setting.
11. Did the probation officer treat your child as an individual and not just like everyone else?
 Yes No
12. Did you feel that you could talk to your child's probation officer and he/she listened?
 Yes No
13. Do you feel that there was appropriate communication between:
You and your child's probation officer: Yes No
The probation officer and other providers involved with your child: Yes No
The probation officer and your child's school: Yes No
14. Do you feel that your child made improvements in any of the following areas during his/her probation supervision?
 School/education Relationship with parent(s) Behavior in the home
 Substance use/abuse Friends/Peers Making better choices

15. How often did your child's probation officer discuss his/her court-ordered fees with you?
- | | |
|---|---|
| <input type="checkbox"/> Once per month or more | <input type="checkbox"/> Less than once per month |
| <input type="checkbox"/> Never | <input type="checkbox"/> Not applicable (N/A) – no fees ordered |

General Comments

16. Do you feel connected to the outside resources that were provided to your child and yourself through the probation office?

Yes No

If Yes, are you planning to continue to utilize the resource in the future?

Yes No

17. What recommendations for improvement in regards to probation do you have? _____

18. Additional comments: _____

19. Would you like someone from the Probation Department to contact you for additional information:
 Yes No If so, what number may we contact you at? _____

THANK YOU FOR SHARING YOUR COMMENTS.

Please return this form to the Probation Reception Desk. You may also fax it to (317)327-4269 or e-mail it to Christine.Kerl@indy.gov