



Stand and Be Counted

How many family life educators are out there? What are they doing, and what do they need? This survey is your chance to stand and be counted among the growing army of family life educators.

If you share information related to family life...
with families couples parents youth or students
by teaching writing coordinating speaking or creating products

How will your input help families?

Family Life Education Institute is a non-profit organization that supports family life educators with resources and ideas. We are collecting this information in order to be a better resource to educators, helping them save time, energy, and money.

Results from this survey will help us inform you of trends and successes in the field, provide needed resources that allow you to better serve families, and increase the number of families helped by quality family life education. Specifically, this information will be used to develop the following tools:

1. A How-to Guide sharing with you to the most effective ways of reaching families.
2. A Resource Directory to give you access to the best family life education materials.
3. An Online Center, www.FamilyLifeEducation.com, providing a new way to connect families to your workshops, materials and more.

See www.familylifeeducation.org for more information.



How do you offer input?

- 1) Complete the survey:
 - ◆ on-line at www.familylifeeducation.org/survey, or
 - ◆ unfold this brochure and return this hard copy by mail
- 2) Pass it on to your colleagues by:
 - ◆ emailing them the link to the survey (www.familylifeeducation.org/survey), or
 - ◆ requesting additional hard copies by contacting us at (800)452-5662 or info@familylifeeducation.org

Then you are a family life educator, so take a stand.

Your knowledge and experience will help us provide information and resources to better prepare family life educators. Better prepared family life educators can better help families.



Stand and be counted. Check a box and help families today.

EXPERIENCE:

1. How long have you been involved in family life education?

- 0-1 yr 4-5 yrs 10-19 yrs
 2-3 yrs 6-9 yrs 20+ yrs

2. How many hours a week do you currently spend involved in family life education? (including preparation, presentation, program administration, etc.)

- 0 hrs 10-19 hrs 30-39 hrs
 1-9 hrs 20-29 hrs 40+ hrs

3. What percentage of that time is:

- part of your paid career _____%
on the side (for extra income) _____%
volunteer _____%

4. What percentage of that time is in:

- education _____%
coordination/ administration _____%
curriculum development _____%
product development _____%
preparation _____%
other _____%

5. Are you involved in family life education:

- Independently With an organization Both
(skip to question 9) (skip questions 9-10)

6. What is the name of the organization?

7. What kind of organization is it?

- Business K-12
 Community education Military
 Counseling Religious
 Extension Social service
 Family life education University/college
 Health care
 Other _____

8. What is your job title?

9. Why did you choose to work independently?

10. How did you establish your work?

11. Which of these traditional methods have you tried? How would you rate their effectiveness?

	Not at all	Somewhat	Very
<input type="checkbox"/> One-time Class/Workshop	1 2	3 4	5
<input type="checkbox"/> Series of Classes/Workshops	1 2	3 4	5
<input type="checkbox"/> Retreat	1 2	3 4	5
<input type="checkbox"/> Course (educational institution)	1 2	3 4	5

12. What alternative methods have you tried? How would you rate their effectiveness?

	Not at all	Somewhat	Very
<input type="checkbox"/> Book	1 2	3 4	5
<input type="checkbox"/> CD-ROM	1 2	3 4	5
<input type="checkbox"/> Family to Family/Mentoring	1 2	3 4	5
<input type="checkbox"/> Internet	1 2	3 4	5
<input type="checkbox"/> Magazine	1 2	3 4	5
<input type="checkbox"/> Newspaper Column	1 2	3 4	5
<input type="checkbox"/> Other: _____	1 2	3 4	5
<input type="checkbox"/> Other: _____	1 2	3 4	5

13. What is the average number of participants you have in a workshop/retreat/course?

- 1-9 25-49 100-199 500-999
 10-24 50-99 200-499 1000+

14. Which of the following marketing methods have you tried? How would you rate their effectiveness?

	Not at all	Somewhat	Very
<input type="checkbox"/> Flyers	1 2	3 4	5
<input type="checkbox"/> Newspaper	1 2	3 4	5
<input type="checkbox"/> Posters	1 2	3 4	5
<input type="checkbox"/> Radio	1 2	3 4	5
<input type="checkbox"/> Referrals	1 2	3 4	5
<input type="checkbox"/> Television	1 2	3 4	5
<input type="checkbox"/> Word of mouth	1 2	3 4	5
<input type="checkbox"/> Other _____	1 2	3 4	5
<input type="checkbox"/> Other _____	1 2	3 4	5

15. How much do you spend annually on marketing?

- \$0-\$49 \$100-\$499 \$1,000-\$4,999 \$10,000-\$19,999
 \$50-\$99 \$500-\$999 \$5,000-\$9,999 \$20,000+

16. How do you charge for family life education?

- Per workshop/course \$ _____
retreat \$ _____
day \$ _____
 Per participant \$ _____
 No charge
 Other _____

17. How much gross annual income do you generate from your involvement in family life education?

- \$0-\$499 \$5,000-\$9,999 \$40,000-\$59,999
 \$500-\$999 \$10,000-\$19,999 \$60,000-\$99,999
 \$1,000-\$4,999 \$20,000-\$39,999 \$100,000+

18. What percentage of your total annual income does this represent?

- less than 10% 25-49% 75-99%
 10-24% 50-74% 100%

19. Which types of audience have you worked with? How effective was your work with each?

	Not at all	Somewhat	Very
<input type="checkbox"/> College age students	1 2	3 4	5
<input type="checkbox"/> Couples	1 2	3 4	5
<input type="checkbox"/> Parents	1 2	3 4	5
<input type="checkbox"/> Teens	1 2	3 4	5
<input type="checkbox"/> Whole families	1 2	3 4	5
<input type="checkbox"/> Other _____	1 2	3 4	5
<input type="checkbox"/> Other _____	1 2	3 4	5

20. What types of locations have you used for your workshop/retreat/course(s)? How effective were they?

	Not at all	Somewhat	Very
<input type="checkbox"/> Community center	1 2	3 4	5
<input type="checkbox"/> Conference center	1 2	3 4	5
<input type="checkbox"/> Home	1 2	3 4	5
<input type="checkbox"/> Hotel	1 2	3 4	5
<input type="checkbox"/> Office	1 2	3 4	5
<input type="checkbox"/> School	1 2	3 4	5
<input type="checkbox"/> Other _____	1 2	3 4	5
<input type="checkbox"/> Other _____	1 2	3 4	5

21. What topics have you offered for your workshop/retreat/course(s)? How effective were they?

	Not at all	Somewhat	Very
<i>Family Finance</i>	1 2	3 4	5
_____	1 2	3 4	5
_____	1 2	3 4	5
_____	1 2	3 4	5
_____	1 2	3 4	5
_____	1 2	3 4	5
_____	1 2	3 4	5
_____	1 2	3 4	5
_____	1 2	3 4	5

22. Do you evaluate the effectiveness of your workshop/retreat/course(s)?

- Yes, by Participant feedback form No
 Pre/post assessment
 Follow-up inquiry
 Other _____

23. How do you get evaluation of yourself as an educator?

24. How fulfilled do you feel in your work as a family life educator?

	Not at all	Somewhat	Very
	1 2	3 4	5

25. What frustrations do you have with family life education?

26. If you could give "heads up" advice to prospective family life educators, what would you tell them?

QUALIFICATIONS:

1. What is your educational background?

- Bachelor's degree In: _____
 Master's degree In: _____
 Doctorate degree In: _____
 Other: _____

a. How useful has your education been to you as a family life educator?

Not at all	Somewhat	Very
1 2	3 4	5

b. In what specific ways has your education benefited you as a family life educator?

c. What would have made your education more valuable to you as a family life educator?

2. Are you familiar with the Certified Family Life Educator(CFLE) accreditation through NCFR?

- Yes. I am: not interested
 planning to certify
 certified (Provisional Full, or Expired)
 No, I am not (skip to question 3)
 but please send me information

a. How useful has your CFLE certification been to you?

Not at all	Somewhat	Very
1 2	3 4	5

b. In what specific ways has your CFLE certification benefited you?

c. What would have made your CFLE certification more valuable?

3. What other specific training or certification do you have? (if none, skip to question 4)

a. How useful has this other training/certification been to you?

Not at all	Somewhat	Very
1 2	3 4	5

b. In what specific ways has this other training/certification benefited you?

c. What would have made this other training/certification more valuable?

4. What is/are your area(s) of specialty?

- | | |
|---|--|
| <input type="checkbox"/> Blended families | <input type="checkbox"/> Marriage |
| <input type="checkbox"/> Communication skills | <input type="checkbox"/> Parenting |
| <input type="checkbox"/> Cultural diversity | <input type="checkbox"/> Policy |
| <input type="checkbox"/> Divorce | <input type="checkbox"/> Religion and family |
| <input type="checkbox"/> Family crisis | <input type="checkbox"/> Sexuality |
| <input type="checkbox"/> Family science | <input type="checkbox"/> Violence/abuse prevention |
| <input type="checkbox"/> Finance | <input type="checkbox"/> Work and family |
| <input type="checkbox"/> Growth and development | <input type="checkbox"/> Youth development |
| <input type="checkbox"/> Health | <input type="checkbox"/> Other _____ |

RESOURCES:

Instructions: Please help us help both families & educators by providing information about helpful resources you use, offer or know about. Families need to know about workshops they can attend and products they can use at home. Educators need curriculum & program information, the names of specialists they can turn to, and employment positions they can fill. Please check the appropriate box for the resource type & fill in the descriptive information as completely as possible. If you need more space or have questions, go to www.familylifeeducation.org/survey or attach an additional sheet. Send brochures, flyers or other materials if you wish to give more detail.

Thank you for completing this survey. Please refold, affix a stamp, and drop it in the mail.

TITLE/NAME

DESCRIPTION

CONTACT INFORMATION

"Money Matters" Family Finance for Married Couples, taught by Lisa Jones, CFLE, 7/1, 8/3 and by arrangement, 7-8pm Mesa, AZ, \$25/couple Register by calling (801)818-5358

PERSONAL INFORMATION: (Optional)

First Name: _____ Last Name: _____

Address: _____

City: _____ State/Country: _____

Postal Code: _____ Telephone: _____

Email: _____

Male Female Age: _____ # of Children: _____

Marital status: Married Single Divorced Widowed

Please email me a copy of survey results.

FOR FAMILIES	FOR EDUCATORS
WORKSHOP/RETREAT <small>Note topic & location/time (or URL)</small>	PRODUCTS <small>Note type (video, book, game, etc.)</small>
CURRICULUM <small>Note topic & target audience</small>	SPECIALIST <small>Note area of expertise</small>
PROGRAM <small>Note target group & training required</small>	EMPLOYMENT OPPORTUNITIES <small>Note position title & requirements</small>
OTHER <small>(Teaching aids, business tools, products, etc.)</small>	

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