

MARION SUPERIOR COURT PROBATION DEPARTMENT – JUVENILE SERVICES

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 Justice Complex ☐ School: _____
☐ CJC Campus Building ☐ Other: _____
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?

☐ Once per month or more

☐ Less than once per month

☐ Never

☐ 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, FAX to (317)327-4269, E-mail to Chief Probation Officer Christine Kerl at Christine.Kerl@indy.gov or send via mail to the following:

**Christine Kerl, Chief Probation Officer
Marion Superior Court Probation Department
3115 Southeastern Avenue, Suite 100
Indianapolis, IN 46203**