



suicideTALK is a program developed by LivingWorks

Your Feedback

Help the Prevent Suicide Today Team Continue to Serve Our Community

Presentation Date:	Presentation Location:				
Please circle the number that describes your response.	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. I am comfortable/willing to talk openly about suicide.	1	2	3	4	5
2. Before participating in suicideTALK, my answer to #1 would have been:	1	2	3	4	5
3. If a person's words and/or behaviors suggest the possibility of suicide, it is OK to ask them directly if they are thinking about suicide.	1	2	3	4	5
4. Before participating in suicideTALK, my answer to #3 would have been:	1	2	3	4	5
Please write any additional comments you may have about the suicideTALK or clarify any responses:					
(Optional) Check the boxes below for additional information about:					
<input type="checkbox"/> Attending an ASIST workshop <input type="checkbox"/> Hosting another suicideTALK					
If you checked any of the boxes above, please provide your contact information.					
Name:		Email:		Phone:	



suicideTALK is a program developed by LivingWorks

Your Feedback

Help the Prevent Suicide Today Team Continue to Serve Our Community

Presentation Date:	Presentation Location:				
Please circle the number that describes your response.	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. I am comfortable/willing to talk openly about suicide.	1	2	3	4	5
2. Before participating in suicideTALK, my answer to #1 would have been:	1	2	3	4	5
3. If a person's words and/or behaviors suggest the possibility of suicide, it is OK to ask them directly if they are thinking about suicide.	1	2	3	4	5
4. Before participating in suicideTALK, my answer to #3 would have been:	1	2	3	4	5
Please write any additional comments you may have about the suicideTALK or clarify any responses:					
(Optional) Check the boxes below for additional information about:					
<input type="checkbox"/> Attending an ASIST workshop <input type="checkbox"/> Hosting another suicideTALK					
If you checked any of the boxes above, please provide your contact information.					
Name:		Email:		Phone:	