Follow-up Form

This survey should be completed by a community member at the completion of their final interaction or it should be sent to them (via email or text) within 1 week after their final interaction to complete.

* Required

1. Name*:

2. Which digital navigator(s) did you work with?

3. Progress toward technology goals: Please indicate how much progress you made toward each of the goals you set out to achieve.
   - Totally Accomplished
   - Made a Lot of Progress
   - Made a Little Progress
   - Made No Progress

4. Do you have any new digital skills goals you would like to work toward?

5. How confident are you in your ability to find resources for future training and technology needs on your own?
   - Completely Confident
   - Mostly Confident
   - Somewhat Confident
   - Not At All Confident

6. During your interactions with the Digital Navigator Program, were services delivered in a way that met your needs and that made you feel comfortable and respected? (For example, were services offered in a language you could understand; were your accessibility needs met; were your cultural norms considered and respected?)

If no, what could have been done differently?

Digital Navigator Template: digitalinclusion.org/dn
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7. May we contact you to follow-up on your experience with this program?
   If yes, please include the best way to contact you.

8. Is there anything else you would like to share?

Follow-Up for Impact Stories

9. May we contact you to follow-up on your experience with this program?
   - Yes
   - No

10. If yes, please include the best way to contact you
    - Phone call
    - Text message
    - Email