**ASPIRE Counseling Appointment**

**EVERGREEN VALLY COLLEGE**

**PRE-SURVEY**

**DATE:\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TIME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please answer the following questions before your counseling appointment:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Strongly Agree** | **Agree** | **Disagree** | **Strongly Disagree** |
| **1. I know the various academic and support services provided by the ASPIRE Program.** |  |  |  |  |
| **2. I know how to enroll in courses using MyWeb.** |  |  |  |  |
| **3.   I know the General Education courses I need to complete for my intended goal.** |  |  |  |  |
| **4. I know the courses I need to complete for my major.** |  |  |  |  |

Following your counseling appointment, please turn over to complete the post-survey. Thank you!

**ASPIRE Counseling Appointment**

**EVERGREEN VALLY COLLEGE**

**POST-SURVEY**

**DATE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TIME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please answer to the following questions after your counseling appointment:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Strongly Agree** | **Agree** | **Disagree** | **Strongly Disagree** |
| **1. I know the various academic and support services provided by the ASPIRE Program.** |  |  |  |  |
| **2. I know how to enroll in courses using MyWeb.** |  |  |  |  |
| **3.   I know the General Education courses I need to complete for my intended goal.** |  |  |  |  |
| **4. I know the courses I need to complete for my major.** |  |  |  |  |

Comments: Please write any additional comments you have below.