Therapy Evaluation Form

We would like you to indicate below how much you believe, right now, that the therapy you are receiving will help to improve your lifestyle / functioning. Belief usually has two aspects to it: (1) what one thinks will happen and (2) what one feels will happen. Sometimes these are similar; sometimes they are different. Please answer the questions below. In the first set, answer in terms of what you think. In the second set answer in terms of what you really and truly feel. We do not want your course convenors to ever see these ratings, so please keep the sheet covered when you are done.

Set I
1. At this point, how logical does the course offered to you seem?

   not at all logical          somewhat logical          very logical

2. At this point, how successfully do you think this course will be in raising the quality of your functioning?

   not at all useful          somewhat useful          very useful

3. How confident would you be in recommending this course to a friend who experiences similar problems?

   none at all                Somewhat confident          very confident

4. By the end of the course, how much improvement in your functioning do you think will occur?

   0%  10%  20%  30%  40%  50%  60%  70%  80%  90%  100%

Set II
For this set, close your eyes for a few moments, and try to identify what you really feel about the course and its likely success. Then answer the following questions.

1. At this point, how much do you really feel that the course will help you to improve your functioning?

   not at all                somewhat                        very much

2. By the end of the course, how much improvement in your functioning do you really feel will occur?

   0%  10%  20%  30%  40%  50%  60%  70%  80%  90%  100%