## Orange County Transitional Reentry Center

## Exit Interview

Participant Name: A#:

Date of Interview: Treatment Staff Providing Care:

How long were you in the Reentry Program?

What did you like best about the program?

Do you feel that all the rules and regulations were made clear to you during the orientation process?

- 1. Was the program easier or harder than you thought?
- Would you feel comfortable coming back to see staff for advice and referrals? Yes No
- 3. Have you developed new goals as a result of participating in the program? Yes No
- 4. What goals did you accomplish?
- 5. What classes did you attend?
- 6. Which classes were helpful to you?
- 7. Which classes were least helpful?
- 8. Were there positive things from the program that will help you in the future? Yes ☐ No ☐ If yes, in what way?
- 9. What aspects of the program challenged your assumptions the most? Why?
- 10. What aspects of the program were least helpful to your recovery? Why?

Assessment staff performing interview:

Participant's Signature: