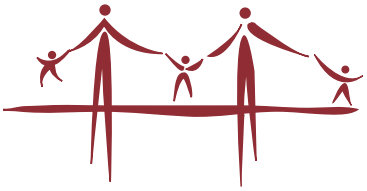

Family Pre-Services Survey

Alliance for Community Respite Care
P.O. Box 15477
Pittsburgh, PA 15237
Phone: 800-876-7607
412-655-8616

1. How did you hear about us?

2. Why do you need respite care? Specifically, what do you hope to do/accomplish by having a break from care giving?

3. What has prevented you from accessing respite care?

4. How stressed are you as a result of caring for your child with special needs?
   Not at all Somewhat Moderately Quite a bit Extremely

Name:_____

Date of Service: _____