

Age \_\_\_\_\_

## DISABILITY ADVOCACY AND AWARENESS: PEOPLE FIRST SURVEY

| Gender (optional, circle one): Male Female No  | n-binary |                        |          |  |  |
|--|----------|------------------------|----------|--|--|
| Place a check in the column to show your level of agreement with the following statements. |          |                        |          |  |  |
|  | Agree    | Not sure or not always | Disagree |  |  |
| 1. I cannot easily recognize people with disabilities.                                     |          |                        |          |  |  |

## STOP. Complete the second part of this survey when given instructions.

Complete the bottom half of this page AFTER the presentation.

2. I understand how to use person-first language.

3. It is easy for me to appropriately refer to a

4. I am comfortable when talking with someone

person with a disability.

who has a disability.

Complete the top half of this page BEFORE the presentation.

Now that you have learned more about People First, place a check in the column to show your level of agreement with the following statements.

|  | Agree | Not sure or not always | Disagree |
|--|-------|------------------------|----------|
| 1. I cannot easily recognize people with disabilities.                     |       |                        |          |
| 2. I understand how to use person-first language.                          |       |                        |          |
| 3. It is easy for me to appropriately refer to a person with a disability. |       |                        |          |
| 4. I am comfortable when talking with someone who has a disability.        |       |                        |          |

Please rate your overall experience with the subject of this presentation (circle one):

Excellent Very Good Good Fair Poor

Comments:

