

SHINGLE SPRINGS BAND OF MIWOK INDIANS TRIBAL COURT  
P.O. Box 531, Shingle Springs, CA 95682

1. Please rate the importance of the following in your decision to enter the Tribal Wellness Court

**Circle one number**

	<b>Very Important</b>	<b>Somewhat Important</b>	<b>Not Important</b>
a. Possibility to have my charges reduced or dismissed	1	2	3
b. Possibility to not go to jail/juvenile detention	1	2	3
c. Possibility to get treatment for my alcohol/drug problem	1	2	3
d. Possibility to get a job	1	2	3
e. Possibility to get back with my Tribal	1	2	3
f. Possibility to get back into/on track with school	1	2	3
g. Other:	1	2	3
	1	2	3

2. Please rate the importance of the following in your decision to remain in the Tribal Wellness Court

	<b>Very Important</b>	<b>Somewhat Important</b>	<b>Not Important</b>
a. The opportunity to talk with the judges about your problems and progress	1	2	3
b. The quality of services provided	1	2	3
c. The drug/alcohol testing	1	2	3
d. The possibility of consequences for not complying	1	2	3
e. The possibility of incentives for complying	1	2	3
f. Improvements in your Tribal, vocational or education situation	1	2	3
g. The native teachings, activities and ceremonies included as part of my treatment	1	2	3
h. Other:	1	2	3
	1	2	3

3. Please rate the following in your success in the Tribal Wellness Court

	<b>Very Important</b>	<b>Somewhat Important</b>	<b>Not Important</b>
a. The judges monitoring my progress	1	2	3
b. The high frequency of Court appearances	1	2	3
c. Intensity/Frequency of treatment	1	2	3
d. The quality of treatment	1	2	3
e. The long period of treatment	1	2	3
f. The high frequency of drug/alcohol testing	1	2	3
g. My having received consequences	1	2	3
h. My having received incentives	1	2	3
i. Support from my Tribal and friends	1	2	3
j. Other:	1	2	3

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4. What change in the Tribal Wellness Court do you suggest?

	Very Important	Somewhat Important	Not Important
a. Time with the judge	1	2	3
b. Frequency of Court appearances	1	2	3
c. Intensity/Frequency of treatment	1	2	3
d. Quality of treatment	1	2	3
e. Educational or vocational opportunities	1	2	3
f. Frequency of drug/alcohol testing	1	2	3
g. Use of incentives	1	2	3
h. Use of consequences	1	2	3
i. Length of time in the program	1	2	3
k. Other:	1	2	3
	1	2	3

5. Do you have other suggestions?

6. Were you given enough information about the program before you entered?

- a.  Yes, I was given enough information
- b.  No, I was not given enough information

If “No”, what else should you have been told?

7. Would you be interested in service as a supportive mentor for people currently in the Tribal Wellness Court?

- a.  Yes, definitely
- b.  No, definitely
- c.  Possibly, Please send me more information