**Civic Balance Program – Before/After Survey**

*Please complete this survey before and after the program to help us understand your experience and track changes in perception, confidence, and civic mindset. Your responses are anonymous unless you choose to share your name.*

**Section 1: Perceptions & Emotions**

**1. How often do you feel frustrated or angry when talking about politics or social issues?**
□ Never □ Rarely □ Sometimes □ Often □ Always

**2. How hopeful are you that our society can bridge political and cultural divides?**
□ Not at all hopeful □ Slightly □ Moderately □ Very □ Extremely hopeful

**3. When thinking of people who disagree with you politically, you generally feel:**
□ Angry □ Dismissive □ Curious □ Respectful □ Empathetic

**Section 2: Skills & Confidence**

**4. How confident are you in your ability to have respectful conversations with people who hold opposing views?**
□ Not at all □ Slightly □ Moderately □ Very □ Extremely confident

**5. How equipped do you feel to de-escalate polarized conversations in your community or workplace?**
□ Not equipped □ Somewhat □ Moderately □ Very □ Fully equipped

**6. How likely are you to engage with someone across political or ideological differences after this program?**
□ Very unlikely □ Unlikely □ Neutral □ Likely □ Very likely

**Section 3: Beliefs & Civic Mindset**

**7. I believe bridging divides is essential to the future of our democracy.**
□ Strongly disagree □ Disagree □ Neutral □ Agree □ Strongly agree

**8. I feel a personal responsibility to contribute to a more respectful and balanced civic culture.**
□ Strongly disagree □ Disagree □ Neutral □ Agree □ Strongly agree

**9. My understanding of polarization and its impact has:** *(Answer this in the AFTER survey)*
□ Not changed □ Slightly increased □ Moderately increased □ Greatly increased

**Section 4: Program Reflection (AFTER only)**

**10. What was the most valuable insight or takeaway you gained from this experience?**

**11. What change, if any, do you notice in yourself as a result of this program?**

**12. What would help you continue practicing civic balance in your daily life?**

**Optional: Your Name (if you’d like us to follow up):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Session/Group:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_