

# Harmony House Participant Voice

## PEACE VALUES

Positivity | Encouragement | Advocacy | Compassion | Equality

### **Your voice matters.**

Use this form to share ideas, needs, concerns, or suggestions. You can ask staff to help you fill it out.

## **1. Your Name**

You may write your name, or leave this blank.

**Name:** \_\_\_\_\_

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

I want to stay anonymous (no name)

## **2. What would you like to share today?**

- Suggestion (an idea to improve something)
- Concern (something I am unhappy about)
- Request (something I need help with)
- Compliment (something I like or appreciate)

## **3. What is your message?**

(Write your idea, concern, or request here.)

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## **4. What would you like to happen next?**

- I want someone to talk with me
- I want help solving this problem

- I want staff to follow up with me
- I just wanted to share my idea (no follow-up needed)

## 5. Who would you like to respond?

- Any staff member
- Supervisor / Manager
- Program Director
- I want to talk with: \_\_\_\_\_

## 6. Best Way to Contact Me

- In person
- Phone: \_\_\_\_\_
- Email: \_\_\_\_\_
- Through staff / support team

## 7. For Staff Use Only

**Received By:** \_\_\_\_\_ **Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
**Action Taken / Response:**

**Response timeline:** Harmony House will respond within **5 business days**.