

Your views on the quality and effectiveness of Extension programs are extremely important. Please tell us about your experience with this activity. Your answers will help us better meet your needs. Thank you!

1. For each item listed below, mark the number in the left column that best describes your level of understanding **BEFORE** the program; then mark the number in the right column that best describes your level of understanding **AFTER** the program.

	Poor	Fair	Good	Excellent								
	1	2	3	4	BEFORE Program				AFTER Program			
Your understanding of . . .	1	2	3	4	1	2	3	4	1	2	3	4
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

2. Please indicate your intentions to adopt each item listed below, or indicate if you have already adopted the item listed or if it does not apply to your situation.

	Definitely Will Not	Probably Will Not	Undecided	Probably Will	Definitely Will	Already Adopted	Not Applicable
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

MARKING INSTRUCTIONS
 CORRECT: ● INCORRECT: ✗ ⊗ 🚫 🚫

54834

3. Number of acres you manage?

4. Number of sheep and/or goats you manage? (Please provide an exact number even if its only your best estimate)

5. Number of each represented in Question 4?
 Wool Sheep:
 Hair Sheep:
 Meat Goats:
 Angora Goats:

6. Did you experience excessive losses from predators during the past 12 months? Yes No Uncertain

7. How many head of livestock did you lose to predators during the past 12 months? Lamb/Sheep: Kids/Goats:

8. Which of the following type(s) of predator control methods do you employ on the land that you manage? (select all that apply)
 Guardian dogs Lethal: aerial gunning, trapping, M44, snares, 1080 collars, etc.
 Other Non-Lethal: fencing, herding, night penning, birthing sheds, etc. None

9. Do you anticipate a potential economic benefit from your participation in this Texas AgriLife Extension Service program?
 Yes (continue with question 10)
 No (skip to question 12)

10. Please indicate which of the following best captures the anticipated economic benefit on a per head basis?
 \$1 to \$5 per head \$6 to \$10 per head \$11 to \$15 per head \$16 to \$20 per head \$21 to \$25 per head Over \$25 per head

11. The anticipated economic benefit can be attributed to which of the following? (select all that apply)
 Increased production
 Reduced input costs
 Other

12. Based on the information provided at the program, what is the likelihood that you would recommend Texas AgriLife Extension Service to your family and friends as a contact for information on livestock guardian dogs? Fill in one number below where 0 = not likely and 10 = very likely.
 0 1 2 3 4 5 6 7 8 9 10
 Not Likely Very Likely