



VCS Domestic Violence Program for Men

Phyllis B. Frank, Director • Susanne Fitzpatrick, Records and Administration
Vanessa Green, Supervisor • Darla Salmon, Court Liaison

Auditor Report

1. Your Name: _____

2. Location & Date of Audit: _____

3. Name/s of facilitator/s: _____

4. Indicate what you understood about the content of the session.

5. Indicate what you observed about the process used in conducting the session.

6. Indicate what you observed about the process used in conducting the session.

7. Indicate an issue or topic that you will raise in Staff Development.
