

## **Level I Event Feedback Form**

1) How did you participate?  In person Online (webinar)  2) Did this event help you acquire useful information?  Yes No Unsure  3) Did the information provided in this event meet your expectations?  Yes No Unsure  4) Base on your experience with this event, would you participate in another event with similar format?  Yes No Unsure  5) Would you be interested in participating in another event in a related subject area?  Yes No Unsure  5) The following refer to your level of satisfaction with the event.  Very Satisfied No Dissatisfied Not Apply  Apply  Outlity of the overall event  Scope of the information  Usefulness of the information  Outlitator(s)  Materials								
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Yes No Unsure    Yes No Unsure	○ No							
No Unsure    No Unsure	4) Base on your ex	perience with this	event, would yo	ou participate in ar	nother event with	similar format?		
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Satisfied Satisfied or Dissatisfied Not Apply Quality of the overall event  Scope of the information	6) The following ref	fer to your level o	of satisfaction wit	th the event.				
the overall event  Scope of the information  Usefulness of the information  Presenter(s)/ facilitator(s)			Satisfied	Satisfied or	Dissatisfied		Not	
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	Presenter(s)/		0	O	O	0		
	Presenter(s)/ facilitator(s)		0	O	O	0		

Comments:
7) How do you plan to share the information obtained during the event?  Email Information Giving a Presentation Holding a Debrief Meeting Posting Information Online Post Paper Handouts/Materials Professional Development Providing a Link to Webinar Recording Sharing Handouts/Materials Elecronically Sharing Paper Handouts/Materials Starting a Workgroups/Committee Writing a Summary to Distribute Word of Mouth Unsure Other, please specify
Comments:
<ul><li>8) Did this event change your thinking or knowledge about the topic? If so, how? If not, please elaborate.</li><li>9) Do you think you or your organization will do anything differently as it relates to the topic? If so, how? If not, please elaborate.</li></ul>
10) Please provide any feedback regarding the event's strengths.
11) Please provide any feedback regarding the event's areas for improvement.
12) What topics would you like to be covered in future events?
13) What additional information or materials would be useful to you or your organization?
14) Other comments:
15) Would you like to be added to a distribution list/listserv to received additional information from FNS in the future?  O No O Unsure O Yes, If you selected "Yes" please provide your email address:
Public reporting burden for this collection of information is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collections of information. An agency may not conduct or sponsor, and a person so not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Agriculture, Food and Nutrition Service, Office of Research and Analysis, Room 1014, Alexandria, VA 22302 ATTN: PRA (0584-0524). Do not return the completed form to this address.