Public reporting burden for this collection of information is estimated to be 3 minutes per response to complete this questionnaire. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The control number for this project is 0980-0266. The control number responsible project is 0980-0266.

Feedback for Meetings and Events

Meeting/Event Title:			

Thank you for attending <insert title of meeting/event> on <insert date>. Please provide your feedback about the event by completing the brief survey below. Your responses are anonymous and will help the Children's Bureau to provide useful, informative, and relevant meetings/events in the future.

The following are statements about the presenter/facilitator and the overall event. Please rate your agreement using this scale:

SD - Strongly disagree

D - Disagree

N – Neither agree nor disagree

A – Agree

SA - Strongly agree

Presenter(s)						
The presenter(s)/facilitator(s) was/were well-prepared, knowledgeable, and professional.	SD	D	Z	А	SA	
The presenter(s)/facilitator(s) encouraged discussion and responded well to questions/comments, including challenging questions and differing opinions.	SD	D	Ν	А	SA	
The presenter(s)/facilitator(s) provided the information clearly and logically.	SD	D	Ν	Α	SA	
Meeting/Event						
The material was appropriate for my level of experience and knowledge.	SD	D	N	А	SA	
I received adequate preparatory materials to participate effectively in this meeting/event	SD	D	Ν	А	SA	
The meeting addressed the critical issues of the topic.	SD	D	Ν	Α	SA	
I was able to interact fully as appropriate in this meeting/event.		D	Ν	Α	SA	
I am satisfied with the overall quality of this meeting/event.	SD	D	Ν	Α	SA	

1.	What aspects of this meeting were most helpful to you?				
2.	What, if anything, would you suggest to change for future meetings?				
3.	Do you have any additional comments?				