

Workshop Survey

Thank you for your interest in improving the BSEE Domestic and International Standards Workshop. This information will be used to determine speakers, programs, locations, and other items for future workshops.

Name/Affiliation (Optional): _____

Contact Information (Optional): _____

What is your general response to/opinion of the workshop?

What changes would you suggest?

Future Standards Workshops

How much would the following affect your interest in attending future workshops?

	None	Not Much	Some	A Lot	Will make me attend
Adding a Registration Fee	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Moving the workshop to a hotel in New Orleans	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Adding more breakout sessions	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Longer Duration	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Shorter Duration	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

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