OMB Number: 0607-0760 

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**EVALUATION FORM**

**2015 ACS DATA USERS CONFERENCE**

Hyattsville, MD, **May 11-13**

Thank you for attending the **2nd Annual** **ACS Data Users Conference**! Please take a moment to fill out the evaluation form below to help us plan for future ACS conferences.

1. **How would you rate the following aspects of the ACS Data Users Conference?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Poor** | **Fair** | **Good** | **Very Good** | **Excellent** |
| **Conference facilities** |  |  |  |  |  |
| **Conference organization/staff** |  |  |  |  |  |
| **Conference location** |  |  |  |  |  |
| **Length of sessions** |  |  |  |  |  |
| **Session topics** |  |  |  |  |  |
| **Quality of presentations** |  |  |  |  |  |
| **Roundtable discussions (if applicable)** |  |  |  |  |  |
| **Hotel accommodations (if applicable)** |  |  |  |  |  |

1. **What changes, if any, would you suggest for future conferences?**

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1. **What topics would you like to see covered in future conferences?**

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1. **Any other comments or suggestions?**

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