

General Feedback

Help us
serve you
better by
giving us your
opinion.

1 Name of Program: _____ Date: _____

2 How did you find out about this program? (check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Newspaper | <input type="checkbox"/> Social media (Facebook, etc.) |
| <input type="checkbox"/> Radio | <input type="checkbox"/> From a friend/associate |
| <input type="checkbox"/> Television | <input type="checkbox"/> Public/group announcement |
| <input type="checkbox"/> Postcard or brochure (mailed) | <input type="checkbox"/> Website |
| <input type="checkbox"/> Calendar of Events (mailed) | <input type="checkbox"/> Poster |
| <input type="checkbox"/> Email | <input type="checkbox"/> Other (please specify) |

3 Reason for attendance

- I am a member/friend of the National Archives or sponsoring organization
- I am interested in the subject
- I came with a friend
- Other (please specify) _____

Is this the first National Archives program you've attended? Yes No

Did this program enhance your understanding of the topic? Yes No

Overall, how would you rate your satisfaction with this program?

Highly Successful 5 4 3 2 1 Least Successful

Have you visited the National Archives exhibitions today or ever? Yes No

Will you visit them after this program? Yes No

Additional Comments? _____

If you'd like to receive future program information, please fill out the following:

Name: _____

Email: _____

Mailing Address: (if you wish to receive our program information by mail) _____

If you wish to direct additional comments to a supervisor, you may contact

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