Form approved

OMB 0920-1050

Exp. Date 6/30/2019

**2018 CUPS/Ferguson Summer Showcase – Daily Survey**

 **Monday july 30, 2018**

***This is an anonymous survey to understand the quality of your experience during today’s activities. Its purpose is to improve the program for next year’s students. Please be as frank and candid as possible.***

***Please identify your program site:***

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| **Program Site** |
| * Columbia University
* Kennedy Krieger Institute
* Morehouse College
* University of California, LA
* University of Michigan
* Ferguson Fellowship (Kennedy Krieger Institute)
 |

**Please rate your overall satisfaction with the sessions you attended today.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Poor** | **Below Average** | **Average** | **Good** | **Outstanding** | **N/A** |
| **Director’s Welcome** |  |  |  |  |  |  |
| **Program Overview and Purpose** |  |  |  |  |  |  |
| **CUPS Student Coordinating Center** |  |  |  |  |  |  |
| **Health Equity Enterprise Framework – Paving the Road to Health Equity (Panel)** |  |  |  |  |  |  |
| **Interactive Public Health Tours –** **CDC David Spencer Museum** |  |  |  |  |  |  |
| **Interactive Public Health Tours –** **CDC Walking Tour** |  |  |  |  |  |  |
| **Interactive Public Health Tours –** **CDC Steven Thacker Library** |  |  |  |  |  |  |

***Please respond to the following questions:***

1. **What did you find most interesting of the content covered in today’s presentations?**

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1. **What did you find least interesting of the content covered in today’s presentations?**

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1. **What did you like most regarding the activities that took place today? (i.e. museum, walking tour, library)**

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|  |

1. **What did you like least regarding the activities that took place today? (i.e. museum, walking tour, library)**

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1. **If you could change one thing about today, what would it be?**

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**Thank you for completing the survey!**

**Don’t forget to drop off this survey before you leave!**

Public reporting burden of this collection of information is estimated to average 8 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. 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.  Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74,  Atlanta, Georgia 30333; ATTN:  PRA (0920-1050).