

# 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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