We would like to provide your team leader with feedback on their performance. This information also allows us to understand what the development needs are. Please complete the following survey honestly and accurately. Your feedback with be shared anonymously. Thank you for your time.

OMB Control #0693-0079

Expiration date: 10/31/2019

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* 1. What is your team r	number? (e.g., 001, 0	002, 020, 021, etc.).	]	
		am leader if you needed		Cimon Foot
Not Easy At All	Not So Easy	Somewhat Easy	Very Easy	Super Easy
3. How well did your te	eam leader listen to te	eam members?		
Not At All	Not So Well	Somewhat Listened	Very Well	Extremely Well
4. How reliable was yo	our team leader?			
Not At All Reliable	Not So Reliable	Somewhat Reliable	Very Reliable	Extremely Reliable
5. How professional w	as your team leader	on your calls?		
Not At All Professional	Not So Professional	Somewhat Professional	Very Professional	Extremely Professional

6. How knowledgeable	s was your team leader		na myery processes:	
Not At All Knowledgeable	Not So Knowledgeable	Somewhat Knowledgeable	Very Knowledgeable	Extremely Knowledgeable
7. Overall, how effective	ve was your team lead	er?		
Not At All Effective	Not So Effective	Somewhat Effective	Very Effective	Extremely Effection
Consider things like plannir	ng, managing the process, c	ommunications skills, inte		am members, Baldriç
	ng, managing the process, c		erpersonal skills, helping tea	am members, Baldrig
Framework / Criteria knowl	edge and award process kno	owledge.		