OMB CONTROL NUMBER: 0704-0553

OMB EXPIRATION DATE: 5/31/2025

***UNCLASSIFIED***

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***UNCLASSIFIED***

Please complete this **five-minute reaction survey.** *Your answers are confidential and will only be reported in aggregate.*

1. The content was presented in a way I could easily understand.

[ ] Strongly Agree

[ ] Agree

[ ] Neutral

[ ] Disagree

[ ] Strongly Disagree

1. On a scale of 1 – 5, please rate your familiarity with session content **BEFORE** attending.

[ ] 1 (Not at all Familiar)

[ ] 2 (Slightly Familiar)

[ ] 3 (Somewhat Familiar)

[ ] 4 (Moderately Familiar)

[ ] 5 (Very Familiar)

1. On a scale of 1 – 5, please rate your familiarity with session content **AFTER** attending.

[ ] 1 (Not at all Familiar)

[ ] 2 (Slightly Familiar)

[ ] 3 (Somewhat Familiar)

[ ] 4 (Moderately Familiar)

[ ] 5 (Very Familiar)

1. What did you enjoy most about the session? Please do not include any PII.

Click or tap here to enter text.

1. What improvements do you recommend? Please do not include any PII.

Click or tap here to enter text.

1. I would recommend this session to my colleagues.

[ ] Strongly Agree

[ ] Agree

[ ] Neutral

[ ] Disagree

[ ] Strongly Disagree