



Feedback Sheet:

Purpose: To get your feedback so we can make this program better to serve your needs;

Using a scoring system of 1 (No) ...to ...10 (Very much/ great), please answer the following questions about this session ... (Date=_____)

Question #		Score
1	The topics made sense for me	
2	I can use what I learned today in the future	
3	The class was engaging	
4	Would you recommend this class to others	

Any specific comments or feedback:

Thank you

