Listening to Your Community

Program Feedback Sheet

1. What is one thing you **liked** about the program/activity?

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2. What is one thing that could **improve** the program/activity?

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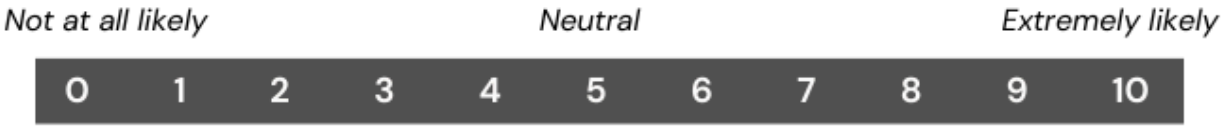
3. How likely is it that you would recommend this program/activity to a friend or family member?

Please circle the number from 0-10 on the scale below that best represents how you feel:



4. Is there anything else you would like to share about this program/activity that you feel is important for us to know? Feel free to share something new that you learned.

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