

# Meeting Evaluation

1. What Went Well?

2. What Should We Do Differently Next Time?

3. How was the pace of the meeting? (Circle One)

Great

Good

Average

Too Slow

Too Fast

4. Would You Like To Attend Another Meeting Like This One? (Circle One)

Yes

No

Other (Please Explain)

5. What Can We Do To Improve The Group?

6. Please rate the facilitators on a scale of 1-10 with 10 being the highest?

Facilitator Name \_\_\_\_\_: Rating \_\_\_\_\_

Facilitator Name \_\_\_\_\_: Rating \_\_\_\_\_

7. Please Share Any Additional Comments.