**Name:** ……………………………………………………..……………………………………………………………………………………………………………

**Email Address: ……………………………………………………..………………………………………………………………………………………….**

We may like to contact you in 4-8 weeks’ time via email to find out if today’s session has made a difference in any way. If you are happy to be contacted, please add in your email address.

**For future events, we would welcome your feedback on today’s content, presentation and speakers**

**Q1. Please can you rate your levels of Knowledge, Skills and Confidence before and after today’s session?**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Pre-Event** | Not applicable to role  0 | None  1 | Very little  2 | Some  3 | Good level  4 | High level  5 | **Post-Event** | Not applicable to role  0 | None  1 | Very little  2 | Some  3 | Good level  4 | High level  5 |
| **Knowledge** |  |  |  |  |  |  | **Knowledge** |  |  |  |  |  |  |
| **Skills** |  |  |  |  |  |  | **Skills** |  |  |  |  |  |  |
| **Confidence** |  |  |  |  |  |  | **Confidence** |  |  |  |  |  |  |

**Q2. How would you rate the content and presentation of the speakers?**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Rating Score Very poor Very good Comments** | | | | | | |
| Content | 1 | 2 | 3 | 4 | 5 |  |
| Presentation | 1 | 2 | 3 | 4 | 5 |  |

**Q3. As a result of attending today’s event, how likely are you to make a change to your future actions and behaviours? *(Please circle one)***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Not at all | Unlikely | Quite likely | Most likely | Highly likely |

|  |  |  |  |
| --- | --- | --- | --- |
| **Q4. If you have answered ‘likely’ above, what change/s will you make?** | | | |
|  |  |  |  |

**Q5. How likely is it that you would recommend this event to a friend or other person? *(Please circle one)***

**Not at all Definitely**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |

**Q6. Please feel free to make any further comments below**

|  |
| --- |
|  |

***Thank you for taking the time to complete this evaluation***