

Stay On Your Feet® ‘getting started’ meeting FEEDBACK FORM

Help us improve the Stay On Your Feet® project by completing this feedback form and handing it to the meeting coordinator before you leave.

Q1. Are you attending as an individual or representing an organisation?

- Individual
- Organisation (please specify).....
If an organisation, which geographic area do you cover?.....

Q2. How did you find out about the meeting?

- A personal invitation
- It was discussed at another meeting I attended
- A friend told me
- Other (please specify).....

Q3. About the meeting

Which part of the meeting did you find the most interesting?

Please comment.....

Which part of the meeting did you find the least relevant?

Please comment.....

What is the most important thing you have learnt today?.....

Did you feel you had enough input into the planning session? Yes No

Please comment.....

Do you have enough information to take back to your organisation? Yes No

If not, what information would be useful?.....

Has the meeting inspired you to become involved in the project?

- Yes, I would like to be involved
- Yes, and I will tell other people about the project
- Yes, but I am too busy at the moment
- No, I am not interested in the project
- No, I don't see it as affecting me

Do you plan to come to the next meeting?

- Yes, I will come to the next meeting
- I will try, but transport is a problem for me
- No, but I will ask someone to attend in my place
- No, but I may attend in the future
- No, I don't want to be involved
- Other (*please specify*).....

Additional comments/feedback

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Thank you for your time. Your feedback is much appreciated.