Your feedback is anonymous; no identifying information is collected or saved. Conference Session (in alphabetical order; scroll to find the session for which you took notes) Feedback about the session RATE THE SESSION Usefulness of preparation materials (e.g., readings) Quality of session materials (e.g., handouts) Quality of presentation/facilitation Your level of interest in the content covered 

| 6<br>7<br>8<br>9<br>10   |
|--|
| Degree to which your expectations were met                             |
| 1<br>2<br>3<br>4<br>5<br>6<br>7<br>8<br>9                              |
| Degree to which you would like to learn more about this topic or theme |
| 1<br>2<br>3<br>4<br>5<br>6<br>7<br>8<br>9<br>10                        |
| Assess the session using the SII Method of Assessment                  |
| Strengths (including why)  |
| Areas for Improvement (including how)                                  |
| Insight (including significance)                                       |

Last Update

Start Time

Finish Time