

| 1. As a result of this workshop ... | Strongly Disagree | Disagree | Neutral | Agree | Strongly Agree |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| I have increased my knowledge about the topic. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I have enhanced skills to be more effective in my role. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I have increased confidence in my ability to fulfill my role in the community. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

2. Please describe what you plan **to do differently** as a result of this program.

3. How **valuable** was this program for your growth and development?

- Not at all valuable
 Somewhat valuable
 Valuable
 Very valuable

4. Which of the following do you plan to do as a result of your participation in this program (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Share information provided with others | <input type="checkbox"/> Practice new skills |
| <input type="checkbox"/> Learn more on the topic | <input type="checkbox"/> Use techniques learned to make better decisions |
| <input type="checkbox"/> Engage with local officials (ex. Write, speak at meeting) | <input type="checkbox"/> Leverage (utilize) new and/or existing community assets |
| <input type="checkbox"/> Increase my involvement in community or civic activities | <input type="checkbox"/> Collaborate with new partner organizations |
| <input type="checkbox"/> Take on new leadership roles | <input type="checkbox"/> None of these |
| <input type="checkbox"/> Other (please specify): _____ | |

5. Which role best describes you? (Choose one)

- | | |
|--|--|
| <input type="checkbox"/> Elected Official | <input type="checkbox"/> Community developer |
| <input type="checkbox"/> Appointed Official | <input type="checkbox"/> Federal or State Agency (Ex. DNR, USDA) |
| <input type="checkbox"/> Community Representative/resident | <input type="checkbox"/> University/Extension Employee |
| <input type="checkbox"/> Local government staff | <input type="checkbox"/> Nonprofit staff, board member, or volunteer |
| <input type="checkbox"/> Business owner/Entrepreneur | <input type="checkbox"/> Other _____ |

6. How long have you been in this role?

- Less than one year
 1-2 years
 2-4 years
 4-6 years
 More than 6 years

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Program Name: _____ County: _____ Zip Code: _____
Date: _____ Length of program (minutes): _____ Instructor(s): _____