Thank you for your participation and feedback. We are always striving to improve our programs and services. Please take a moment to tell us how we did by completing the survey below.

1. **Your organization and role (please check all that apply):**
   - Head Start/EHS
   - Child Care or Early Childhood Program Director
   - Teacher/Caregiver
   - Family Child Care Provider
   - Other ______________________

   Please circle your response below:

2. **BEFORE this training, my knowledge of the content/topics addressed can best be described as:**
   - 1 I have minimal knowledge in this area.
   - 2 I know some of the basic concepts of this area.
   - 3 I know some of the key information and where to go to find more information.
   - 4 I know this area and am able to give examples and recommend resources.
   - 5 I have a high level of knowledge in this area and am able to be a resource to others.

3. **AFTER this training, my knowledge of the content/topics addressed can best be described as:**
   - 1 I didn’t learn anything new.
   - 2 I have a better understanding of the basic concepts in this area.
   - 3 I now know some of the key information and where to go to find more information.
   - 4 I have specific new information or strategies I want to try or share with others.
   - 5 I learned a lot of new information and strategies to use and share with others.

4. **The information provided and discussed will make a difference in my work:**
   - 1 Strongly Disagree
   - 2 Disagree
   - 3 Undecided
   - 4 Agree
   - 5 Strongly agree

5. **This presentation met or exceeded my expectations:**
   - 1 Strongly Disagree
   - 2 Disagree
   - 3 Undecided
   - 4 Agree
   - 5 Strongly agree
6. What were the most valuable things you learned during this presentation?

7. How do you plan to integrate the information from this presentation in your ongoing work?

8. What topics would you like to learn more about in the future?

9. Please provide any additional thoughts, questions, or suggestions about this presentation.