

Learn+Link+Live

Participant Evaluation

	Strongly Disagree		Neutral		Strongly Agree
I liked the overall quality of the presentations:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I liked the choice of session topics:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I learned a lot by attending:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I liked the quality of the materials provided:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A day-long event was the right length of time:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The day of the week was good for me:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The meeting rooms were comfortable:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The event location was easy to find:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The event location was convenient:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I liked the quality of the food:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I liked the food choices:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Any special needs I had were met:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The volunteers and staff were friendly:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I would recommend this event to others:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Of the sessions you attended, which did you like the most? _____

Why? _____

(Continued on the back)

Suggestions or comments about today's event:

What topics would you like to see presented at a future event?

I receive Ryan White Part A services: Yes No Not Sure I have in the past, but not now

I have seen a doctor in the past year (HIV related): Yes No

I am currently taking HIV medications: Yes No

I have had HIV lab work (CD4 and/or viral load) done in the past year: Yes No

I am: Male

Female

Transgendered

Race/Ethnicity:

White, Not Hispanic

Black, Not Hispanic

Hispanic

American Indian/Alaska Native

Asian/Pacific Islander

More than one race

Age: 13 to 19

20 to 44

45 and over

Decline to say

I would like to be informed of upcoming Learn+Link+Live HIV Education Conferences

I would like information about free or low-cost HIV medical care and supportive services

Please Print

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email address: _____

Phone: _____