



SITE COORDINATOR FEEDBACK FORM

Thank you for your involvement in coordinating the Consumer Education presentation at your location. We value your input and hope you will take time to provide feedback. Once complete, please return this form to the presenter. You may also provide feedback to agcp@mi.gov.

Which presentation(s) did you attend?

- Home Repair & Improvement Scams Money Matters & Scams
 Identity Theft Online Safety
 In Home Care & Senior Residences Phone, Mail, & e-Scams

Date: _____

Location: _____

Presenter: _____

1. Did you have any problems obtaining the handouts?

- Yes *Comments:*
 No

6. Did the presenter relate well to the audience?

- Yes *Comments:*
 No

2. Did you find the handouts user-friendly and self-explanatory?

- Yes *Comments:*
 No

7. Was there a topic you hoped we would have covered in the presentations?

- Yes *Comments:*
 No

3. Are there ways we can improve the presentation coordinating process?

- Yes *Comments:*
 No

8. Please rate the program content.

Was not able to review

Low High

1 2 3 4 5

Comments:

4. Please rate the presenter.

Was not able to review

Low High

1 2 3 4 5

Comments:

5. Was the presenter well-prepared, appropriately dressed, and organized?

- Yes *Comments:*
 No

How did you hear about us?

<input type="checkbox"/>	Expo
<input type="checkbox"/>	Website
<input type="checkbox"/>	Flyer/Bulletin
<input type="checkbox"/>	Community Seminar
<input type="checkbox"/>	Other:

Name: _____

Email Address*: _____
*(*You will be added to our email distribution list)*



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