## **Daily Participant Feedback Form**

Date:				
Please circle the num	ber that best descr	ibes your response t	o each item.	
One of our aims is to satisfied are you with			the project in a ne	utral manner. How
<b>1</b> Very Dissatisfied	<b>2</b> Dissatisfied	<b>3</b> Neutral	<b>4</b> <sub>I</sub> Satisfied	<b>5</b> Very Satisfied
Today's activities we	re conducted in a n	nanner that allowed	me to participate	fully in the process.
<b>1</b> Strongly Disagree	<b>2</b> Disagree	<b>3</b> Neutral	<b>4</b> ı Agree	<b>5</b> Strongly Agree
3. Meeting facilities	and handling of lo	gistics were adequa	te to support the p	process.
<b>1</b> Strongly Disagree	<b>2</b> Disagree	<b>3</b> Neutral	<b>4</b> <sub>I</sub> Agree	<b>5</b> Strongly Agree
What suggestions do you have for improvement?				