

NEIGHBORHOOD MEETING: PROGRAM EVALUATION

Thank you for participating in Suburban Hospital's neighborhood meeting on September 4, 2014. Please take a few minutes to answer these questions. Your opinions and comments are very important to us and will help us plan future meetings and develop effective communications tools.

| Please rate: (Please | circle one) | | | |
|---|---|---|---|---|
| The presentations: | Excellent | Good | Average | Poor |
| The Q&A session: | Excellent | Good | Average | Poor |
| Did this program r | neet your obje | ectives for att | ending? Yes | No |
| If answered "no," p | lease explain w | hy: | | |
| | | | | |
| Recommendations | for future me | etings: | | |
| How did you hear | about this mee | eting? (Please | circle) | |
| Flyer Word | er Word of mouth | | Other: | |
| | | | omer | |
| - | | | | one? (Please circle) |
| Would you be internal No Yes. I would like to | rested in atten | ding future n | | |
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