(agency) Air Quality Workshop (date)

Please help us improve this workshop experience by providing us with your feedback and ideas on the following areas. Circle the number that best describe these overall:

	Strongly Agree	Agree	Undecided	Disagree	Strongly Disagree
Workshop Format	5	4	3	2	1
Activities	5	4	3	2	1
Facilitators	5	4	3	2	1
Materials provided	5	4	3	2	1
Scheduling	5	4	3	2	1

Evaluation of Workshop Content

1. What new information did you gain as a result of your participation in this workshop? (Please identify at least two items.)

2. Which activities do you plan to use in your curriculum? Please list all that apply; use back if necessary.

3. What additional resources, if any, do you feel you need to successfully teach your students about air quality?

Additional comments; please use back if necessary.