**NAMI Minnesota**

**Faith Communities**

Presenter: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAMI would like your feedback about today’s workshop. Your input will help us ensure we are providing helpful, high quality training.

**Please check the box that best describes how strongly you agree or disagree with each statement.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Strongly Disagree** | **Disagree** | **Neither Agree Nor Disagree** | **Agree** | **Strongly Agree** |
| I was satisfied with this presentation. | 1 | 2 | 3 | 4 | 5 |
| The presenter was knowledgeable about the subject. | 1 | 2 | 3 | 4 | 5 |
| The presenter was organized and well prepared. | 1 | 2 | 3 | 4 | 5 |
| I would recommend this presentation to others. | 1 | 2 | 3 | 4 | 5 |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **As a result of this training ….** | **Strongly Disagree** | **Disagree** | **Neither Agree Nor Disagree** | **Agree** | **Strongly Agree** |
| 1.I learned more about mental illness. | 1 | 2 | 3 | 4 | 5 |
| 2. I learned about resources NAMI offers family and individuals living with mental illness. | 1 | 2 | 3 | 4 | 5 |
| 3. I have a better understanding of the effect of stigma. | 1 | 2 | 3 | 4 | 5 |

5. What was the most useful part of the presentation? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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6. What barriers/problems have you faced in our current mental health system? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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7. Please use the space below to write any additional comments, suggestions, or concerns you have about today’s training. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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