

# 2019 TRAVELING TOURS EVALUATION FORM

## WEDNESDAY, MAY 22, 2019

<b>TOUR A-3: JUVENILE JUSTICE CENTER</b>	Very Poor	Poor	Good	Very Good	Exc
<b>BEFORE THIS TOUR</b> , MY LEVEL OF KNOWLEDGE ABOUT THIS TOPIC WAS:					
<b>AFTER TODAY'S SESSION</b> , MY LEVEL OF KNOWLEDGE ABOUT THIS TOPIC WAS:					
<p>Comments on this <u>Traveling Tour site only</u> (Use the back of the sheet if you need more room):</p>               					

<b>IS THIS YOUR ONLY OR LAST TOUR OF THE TWO DAYS OF THE TRAVELING TOURS? IF YES, ANSWER THE FOLLOWING QUESTIONS:</b>
<p><b>1. What other <u>Macomb County</u> tour sites would you like to see offered at next year's Traveling Tours?</b></p>    <p><b>2. If you think your non-profit agency would be interested in being a future Traveling Tours site, who needs to be contacted within your agency to schedule that tour (name, title, and their contact information)?:</b></p>     <p><b>3. How did you hear about Traveling Tours? (Check all that apply.)</b></p> <p><input type="checkbox"/> Electronic brochure sent to my e-mail address</p> <p><input type="checkbox"/> "Save the Date" poster displayed at my office</p> <p><input type="checkbox"/> HSCB Focus newsletter</p> <p><input type="checkbox"/> The event was announced at a staff meeting I attended</p> <p><input type="checkbox"/> Other (Please specify): _____</p>
<p><b>OPTIONAL:</b></p> <p>Your Name _____ Agency _____</p> <p>Telephone _____ E-mail _____</p>

