

**2018 TRAVELING TOURS EVALUATION FORM
THURSDAY, MAY 17, 2018**

D-4 CARE PEER RECOVERY COACHES	Very Poor	Poor	Good	Very Good	Exc
BEFORE THIS TOUR . . .					
My level of knowledge about this topic was:					
AFTER TODAY'S SESSION, . . .					
My level of knowledge about this topic was:					
Comments on this <u>breakout session only</u>:					

**IS THIS YOUR ONLY OR LAST TOUR OF THE TWO DAYS OF THE TRAVELING TOURS?
IF YES, ANSWER THE FOLLOWING QUESTIONS:**

- What other tour sites would you like to see offered at next year's Traveling Tours?

- How did you hear about Traveling Tours?
 - Electronic brochure sent to my e-mail address
 - "Save the Date" poster displayed at my office
 - HSCB Focus newsletter
 - The event was announced at a staff meeting I attended
 - Other _____

- Would your non-profit agency be interested in being a future Traveling Tours site?

Name _____ Agency _____

Telephone _____ E-mail _____