



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

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

Name of Session: **Diabetes Complications**

For each statement below, please circle your answer.

		Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1.	Today's session was easy to understand.	1	2	3	4	5
2.	Today's session kept me interested.	1	2	3	4	5
3.	The information I learned today was new to me.	1	2	3	4	5
4.	The information I learned today helps me understand how diabetes affects the body.	1	2	3	4	5
5.	The information I learned today will help me speak with clients about diabetes complications.	1	2	3	4	5
6.	I know where to get help to better understand diabetes complications.	1	2	3	4	5
7.	I would attend another Diabetes 101 education session.	1	2	3	4	5

		Poor	Below Average	Average	Good	Excellent
8.	Overall, I rate this session:	1	2	3	4	5

		Just Right	Too Short	Too Long
9.	The length of the session was:	1	2	3

10. What did you learn today that was new to you?

11. What is one thing that you will start doing differently after this session?

12. Other comments: (All comments are welcome and very helpful!)