

**NUTRITION PROGRAMS
MEAL SITE COORDINATOR FOUNDATIONS
FACILITATOR FEEDBACK**

Complete & return to ICOA & retain copies for your records

Facilitator: _____ Date: _____

of Participants: _____

	Strongly Disagree	Disagree	Agree	Strongly Agree
1. The materials provided adequate preparation for me to effectively present the topic	1	2	3	4
2. When did you review or use the provided materials?				
	Never Reviewed	Just Before Session	During Session, Only	To Prep & During Session
a. PowerPoint Presentation	1	2	3	4
b. Slide Deck Personalization Guide	1	2	3	4
c. Facilitator Guide	1	2	3	4
d. Presentation Outline	1	2	3	4
e. Presentation Script	1	2	3	4
f. Coordinator Reference Guide	1	2	3	4
g. I used my own materials (<i>please list</i>):				
	Strongly Disagree	Disagree	Agree	Strongly Agree
3. The videos enhanced understanding of the topic and/or techniques	1	2	3	4
4. The sample forms & documents (Toolkit & "Appendix") enhanced understanding	1	2	3	4
5. The discussions offered engagement and relevant examples/stories	1	2	3	4
6. The Summaries provided participants the opportunity to review important concepts or techniques	1	2	3	4

Additional Comments:

Errata (Please identify any factual or typographical errors, or formatting inconsistencies so we can ensure quality materials. Include document title and the specific location/verbiage):

***Return this form to ICOA
within 30 days of your presentation.***
Your feedback is appreciated and important to our success!