**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Study ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Facilitated Activity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Instructions:** Thank you for your involvement with the SEED study. We are interested in knowing more about your experience participating in this facilitated activity. Please read each question carefully and choose the response that best matches your opinion. There are no right or wrong answers. All information is confidential and will be used to evaluate and improve this project.

**To what extent do you AGREE or DISAGREE with the following statements. Please check the box that best matches your opinion.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Strongly Agree** | **Agree** | **Disagree** | **Strongly Disagree** |
| 1. **The goals of this activity were clearly defined.**
 | ⧠ | ⧠ | ⧠ | ⧠ |
| 1. **The goals of this activity were met.**
 | ⧠ | ⧠ | ⧠ | ⧠ |
| 1. **The activity was organized and easy to understand.**
 | ⧠ | ⧠ | ⧠ | ⧠ |
| 1. **The facilitator was well prepared.**
 | ⧠ | ⧠ | ⧠ | ⧠ |
| 1. **This activity is an important step in creating stakeholder driven research questions.**
 | ⧠ | ⧠ | ⧠ | ⧠ |

1. **Overall, how would you rate today’s activity?**

⧠ Excellent ⧠ Good ⧠ Fair ⧠ Poor

1. **What did you think was effective about today’s activity?**
2. **What, if anything, about today’s activity could be improved, and how?**