



## **Empower Us Training Evaluation**

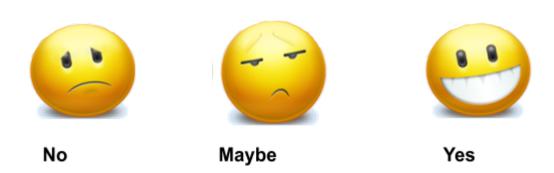
Please fill in this evaluation form about the training. Circle the face that matches the way you feel.

What is your r	iame?				
What country	are you fro	m?			
What organisa	ation are vo	ou from?			
vviiat Organise	——————————————————————————————————————				
Llow do you fo	al about th	o training?			
How do you feel about the training?					
	4		9 9		
Very bad	Bad	ок	Good	Great	

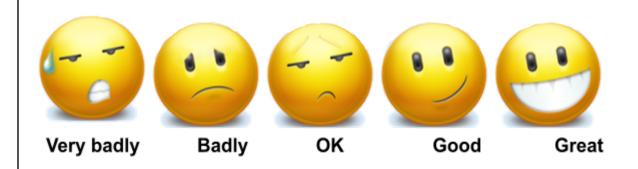




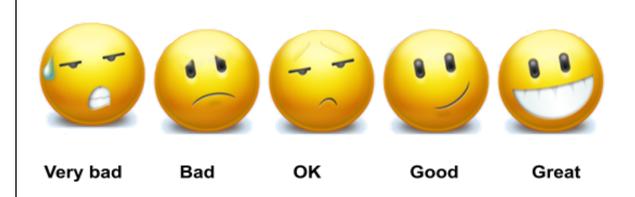
## Were you able to follow and understand the training?



What do you feel about the length of the training?



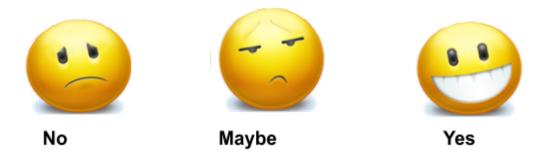
What do you feel about the activities we used in the training?



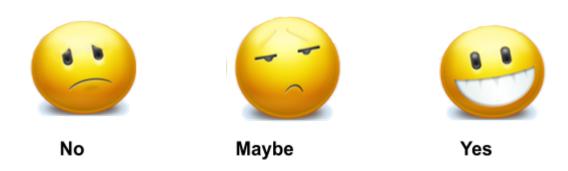




Did you learn new things about self-advocacy and rights in mis training?



Do you feel confident about speaking to others about self-advocacy and inclusion?



Please write here what you liked most about the training





Please write here what we can change for next time				
Please write here any other ideas or comments you have about				
the training.				
the training.				

Thank you for filling in and returning this form.