



NIHCM
FOUNDATION

Closing the Gaps in Health Care for Adolescents and Young Adults



January 10, 2006

EVALUATION

We would appreciate your comments on the meeting. Please fill out this evaluation form and leave it at the registration table or return it to us by fax to 202-296-4319. If you need extra space, please use the reverse side.

1. Please grade (circle) the Forum's usefulness to you. (low) 1 2 3 4 5 (High)

Summarize _____

2. Did you gain any ideas that you hope to implement in your plan or program? Yes ___ No ___

Summarize _____

3. Did you gain any ideas for collaboration and/or coordination with others? Yes ___ No ___

If so, with whom? Summarize _____

4. Do you have comments on the format or content of the Forum? _____

5. Do you have comments on the speakers? _____

5. General comments or suggestions? _____



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Affiliation: Federal _____ State _____ Health Plan _____ University _____

Congressional Staff _____ National Organization _____ Media _____ Other _____