Thank you for participating in the “Take Control of Your Health” program.
Please tell us your thoughts about the workshop.

1. The leaders were well prepared.
   - [ ] Strongly Agree
   - [ ] Agree
   - [ ] Disagree
   - [ ] Strongly Disagree

2. The classes were well organized.
   - [ ] Strongly Agree
   - [ ] Agree
   - [ ] Disagree
   - [ ] Strongly Disagree

3. As a result of this workshop, I have made changes in my lifestyle, i.e., healthy eating, exercise, etc.
   - [ ] Strongly Agree
   - [ ] Agree
   - [ ] Disagree
   - [ ] Strongly Disagree

4. I would recommend this workshop to a friend or relative.
   - [ ] Strongly Agree
   - [ ] Agree
   - [ ] Disagree
   - [ ] Strongly Disagree

What other changes have you made as a result of this class?

Other comments or suggestions:

For Workshop Leaders Only:
- Date:
- Site:

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