

Health Initiatives for Youth Speakers Bureau Training Feedback Questionnaire

June 24, 1997

RESPONDENT ID:

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First Name Initial	Last Name Initial		Gender Male=1 Female=2	Birth Month	Birth Day	Birth Year			

Thank you for participating in the Speakers Bureau Training. We want to know what you thought about today's training. It only will take a few minutes to answer these questions. There are no right or wrong answers, as we are interested in knowing your opinions.

This survey is voluntary, which means you can refuse to answer some or all of the questions. Everything that you tell me is completely confidential; I will not tell anyone your answers or comments – including current staff on the HIFY project. We will not use your name in any reports or documents, nor will your name be written anywhere on this form.

Race/Ethnicity (*choose one answer*):

- African American
- Caucasian
- Latina
- Asian American/Pacific Islander
- Native American
- Don't know/refused to indicate
- Multi-racial

Approximate Age (*choose one answer*):

- Under 18
- 18-24
- 25-34
- 35-44
- 45-54
- 55 or over
- Don't know/unable to judge

1. How useful is/was today's training? (*choose one answer*)

- Extremely useful
 Very useful
 Don't know
 Not very useful
 Not at all useful

2. Would you recommend that another person attend today's training before beginning a speaking engagement? (*choose one answer*)

- Definitely yes
 Probably yes
 Don't know
 Probably not
 Definitely not

3. What are three (3) new things that you are learning/have learned in the training today?

1. _____
2. _____
3. _____

3a. Which one was the most valuable? (*circle one of the numbers in the previous question.*)

4. Do you think the information presented in today's training will help you to relay your personal story to young people? (choose one answer)

- Definitely yes Probably yes Don't know Probably not Definitely not

5. Have you ever wanted to lead a speaking engagement about being a young person living with HIV/AIDS?

- No Yes

6. Have you ever led a speaking engagement?

- No Yes

6a. If yes → What speaking engagements?

6b. If no → What things prevented you from participating?

7. How comfortable would you feel leading a speaking engagement after today's training?

(circle one answer)

- 1 2 3 4 5 6 7 8 9 10
Extremely comfortable Not comfortable at all

8. What type(s) of other information would you like to see included/addressed in this training?

9. Are you looking forward to tomorrow's training? (choose one answer)

- Definitely yes Probably yes Don't know Probably not Definitely not

9a. Why or why not?

10. Do you have any comments about today's training?
