**TASC/TGIC/NCMA Training Event Feedback Form**

Name (Optional)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Organization (optional) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Event Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Government\_\_\_\_\_ Industry\_\_\_\_ Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Yes\_\_\_ No\_\_\_ Was today’s training relevant to your career development?

Yes\_\_\_ No \_\_\_ Will the information be useful in your day to day job performance?

Yes\_\_\_ No \_\_\_ Would you recommend such training to your colleagues and customers?

Yes\_\_\_ No \_\_\_ Did today’s event enhance Government and Industry communication?

What other topics and issues would you like to see addressed in future Reverse Industry Days, Exchange Briefings, or monthly training sessions?

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