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**NFF @ Work Participant Feedback Form**

Date of Training: \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Trainer(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization/workplace­\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­\_\_\_\_\_\_\_\_\_\_

Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The Training… | Strongly disagree | Disagree | No  opinion | Agree | Strongly  Agree |
| helped me to feel more prepared to identify warning signs and risk factors of woman abuse/domestic violence |  |  |  |  |  |
| helped me to feel more prepared to respond to a co-worker that I know or suspect is experiencing woman abuse/ domestic violence |  |  |  |  |  |
| helped me to feel more prepared to provide referrals to a co-worker experiencing abuse and/or an abusive co-worker |  |  |  |  |  |
| will help me with my job |  |  |  |  |  |

1. **What will you take back and use on the job? (Why?)**
2. What had the most impact?

**3. Other comments:**

**Thank You**