**Program Title**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Please select the appropriate response by checking the box to the right of the question.** | **Strongly Disagree** | **Disagree** | **Agree** | **Strongly Agree** |
| As a result of this event… |
|  |  |  |  |  |
| 2. |  |  |  |  |
| 3. |  |  |  |  |
| 4. |  |  |  |  |
| 5. |  |  |  |  |
| 6. |  |  |  |  |

**In one or two sentences, complete the following:**

**One Thing You Might Change for the Next Time…**

**One Thing You Should Definitely Keep for Next Time:**

**The most important thing I learned is…**

**Information About You: Gender:** Male Female **Number of Years in 4-H: \_\_\_\_\_\_ Are you Part of a Military Family?** Yes No

**Race & Ethnicity (Circle any that apply):**  White African-American or Black Asian American Indian Pacific Islander Hispanic Ethnicity