Meeting Evaluation Form for Parents

Meeting 3: Talking Together about Drug Prevention

We want to know what you liked and did not like about this meeting. Please let us know by filling out this page.

1. I thought the meeting was (please circle one number):

1	2	3	4	5
Not Helpful				Very Helpful

2. The thing I liked best about the meeting was:

_____

_____

3. I liked the way the leader:

_____

_____

4. I wish the leader had:

_____

_____

5. The next time you have this meeting, make this change:

_____

_____

6. I would also like to learn more about:

_____

_____

© 2015 Lions Club International Foundation All rights reserved.