

AGING WITH DEVELOPMENTAL DISABILITIES
TUESDAY, NOVEMBER 30, 2004

Please take a few moments to fill out the following questionnaire so that in the future, we may better serve your workshop needs.

I. Program

How would you rate the quality of the individual speakers?
 (Please tick one box on each line)

**Excellent Good Satis-
factory Poor Not
Applicable**

Panel Moderator: Aaron Liebowitz, MSW
 Adults & Children with Learning and Developmental
 Disabilities (ACLD)

Communication skills	0	0	0	0	0
Knowledge of subject	0	0	0	0	0
Responsiveness to your questions	0	0	0	0	0
Overall presentation style	0	0	0	0	0

Panelist: Dorit Ben-Moha, D.O., ACLD

Communication skills	0	0	0	0	0
Knowledge of subject	0	0	0	0	0
Responsiveness to your questions	0	0	0	0	0
Overall presentation style	0	0	0	0	0

Panelist: Lawrence T. Force, PhD.
 NYS Office of Mental Retardation &
 Developmental Disabilities for the Aging

Communication skills	0	0	0	0	0
Knowledge of subject	0	0	0	0	0
Overall presentation style	0	0	0	0	0

II. General Workshop Evaluation

How satisfied were you with the:

Workshop Materials	0	0	0	0	0
Registration Process	0	0	0	0	0
Overall educational value of conference	0	0	0	0	0

Which segment was most useful? Why?

Which segment was least useful? Why?

What was the most important thing that you learned at this workshop?

Which single element of the workshop would you change?

III. Attendee information (so we can draw a profile of who attends our programs):

Gender:

- Male
- Female

My Age:

- 16 to 22
- 23 to 25
- 26 to 35
- 36 to 45
- 46 to 55
- 56 to 64
- Over 65

I respond to the needs of a Developmentally Disabled: Adult Age _____ Gender _____
 Child Age _____ Gender _____

The organization I represent is a:

- College/University
- Hospital
- Nursing Home
- Home Health Agency
- Government agency
- Educational institution
- Other – Please specify: _____

Optional: Name _____ Telephone # _____

Thank you for taking the time to provide this feedback.