



Sharing knowledge in enjoying DS leisure

Evaluation leisure professional

PROGRAM FOR IMPROVING QUALITY OF LIFE OF PERSONS WITH DOWN SYNDROME THROUGH INCLUSIVE LEISURE DS LEISURE

We are always keen to receive your views on the training we deliver. The feedback you give allows us to continually adapt training to better suit your needs. We would appreciate it if you could spend a few minutes filling in this form. Please hand it to the supervisor when you have finished.

INFORMATION ABOUT THE VISIT

- A : more than inadequate
- B: inadequate
- C: enough
- D: more than enough

Result	Rating			
Have you been informed about the visit?	A	B	C	D
Have you prepared yourself?	A	B	C	D
Is the information sheet helpful?	A	B	C	D
For a next time, do you like to receive more information?	A	B	C	D
Note:				

Date:

Location :

Thank you for your feedback!