Seminar Critique

2003 DOI Safety and Occupational Health Seminar, March 31 – April 4, 2003

Your responses will help improve our next Seminar

Please leave at the Registration/Info Desk, or Fax or Mail to: attn: Harrison Daniel, MRPS
Fax: 303-236-7336; Mail: 755 Parfet St, Suite 364, Lakewood, CO 80215

Name _____ **Agency** _____

City & State _____ **Phone #**_____ **E-mail** _____

1. **I attended: Circle one: Certificate Course / Technical Sessions**

2. **How did you learn of the Seminar?**
   Circle one: SafetyNet Website / Departmental Memo / Colleague / Other, explain:

3. **Please indicate your involvement in safety/health.**
   Circle one: Full Time / Collateral Duty (part-time) / Non-safety/health

4. **How many years have you been associated with safety/health, either full-time or collateral duty?** _____

Continue on Back if Needed for Following Questions

5. **Which technical sessions did you like and why?**

6. **Which technical sessions that you attended did not meet your needs or expectations and why?**

7. **Overall, what did you think about the Seminar, and any suggestions for improvement?**