**Finding Opportunities to Collaborate Over Monitoring Activities
Workshop**

**Workshop Evaluation**

Thank you for taking the time to complete this feedback form, please leave on your tables after completion

**Your details (optional)**

**Name:** **Organisation:**

**For this workshop, how did you rate** (please tick):

**Poor** ↔ **Excellent**

Venue □ □ □ □ □

General organisation □ □ □ □ □

Relevance to your job □ □ □ □ □

Discussion tables session □ □ □ □ □

Speed collaborating session □ □ □ □ □

**What were you hoping to get out of this workshop?**

**How well were your expectations met?** (please tick):

Fully □ Partially □ Not at all □

**Is there anything else we could have usefully included?**

**Will you follow up on anything discussed today?**

Yes □ No □