

## Evaluation

Circle your response. Include any notes you think will be helpful to SEAGO or the presenter

The training met the objectives listed in the Training Outline.

Strongly agree   Agree   Disagree   Strongly disagree   Don't Know/No Opinion

This training was not for me. Someone else in my organization should have come.

Strongly agree   Agree   Disagree   Strongly disagree   Don't Know/No Opinion

If you agree, who should have come \_\_\_\_\_  
Position or title

The presentation was clear and useful.

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Our organization has the capacity to implement strategies identified in this training.

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Our organization will need additional technical assistance to implement strategies from this training.

Strongly agree   Agree   Disagree   Strongly disagree   Don't Know/No Opinion

General feedback or suggestions:

Check all that apply and include contact name, title, and phone/email

- ☒ Our organization will be requesting further technical assistance on this topic
- ☒ Our organization is willing to be interviewed about the value of this training and our efforts in implementing strategies from this training.

Print clearly

Contact Name and Title: Belly L Norris Director of Library & Leisure Services  
Organization Name: Town of Huachuca City  
Phone and or email: knorris@huachucacityaz.gov (520) 456-1063

CAG - Grant Mgmt. 11.9.16

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Organization Name: \_\_\_\_\_

Phone and or email: \_\_\_\_\_

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## Evaluation – Vehicle Asset Management 2016

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General feedback or suggestions:

GREAT TRAINER + GREAT INFO

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Contact Name and Title: Dana True, Interim Finance Manager  
Organization Name: Gila County Community Services  
Phone and or email: dtrue@gilacountyaz.gov

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Will see  
once  
review  
grant.

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Organization Name: \_\_\_\_\_

Phone and or email: \_\_\_\_\_

*CAG - Grant Management 11.9.16*



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General feedback or suggestions:

Loved the grant management tools

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