

DIVERSION PRESENTATION FEEDBACK SHEET

Your feedback is valuable to us and will contribute to future focus groups.

DATE: 5/03/09 VENUE: Lotteries House

1. What was your overall impression of the presentation? (Please tick)

Very Bad	Bad	Average	Good	Very Good
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. What was good about the presentation?

3. What can we improve with the presentation?

4. Has your knowledge around diversion increased?

Thank you for taking time to fill out our feedback form.