



***exercise name:***

***document name:*** Participant Feedback Form

***Participant Name (optional):*** \_\_\_\_\_

***Title (optional):*** \_\_\_\_\_ ***Agency:*** \_\_\_\_\_

### **Part 1 – Exercise Review**

In your opinion, what strengths were demonstrated by players during the exercise?

In your opinion, did the exercise identify areas where player improvement is needed? If so, where?

As a result of the exercise, do you feel that any policies, plans, and procedures should be reviewed, revised, or developed? If so, please explain.

## Part 2 – Exercise Design & Conduct

### 1. What is your assessment of the exercise design and conduct?

*Please rate, on a scale of 1 to 5, your overall assessment of the exercise relative to the statements provided below, with 1 indicating strong disagreement with the statement and 5 indicating strong agreement.*

Assessment Factor	Rating of Satisfaction with Exercise				
	Strongly Disagree				Strongly Agree
a. The exercise was well structured and organized.	1	2	3	4	5
b. The exercise scenario was plausible and realistic.	1	2	3	4	5
c. The exercise provided a good practice environment for dealing with this hazard.	1	2	3	4	5
d. Participation in the exercise was appropriate for someone in my position.	1	2	3	4	5
e. The participants included the right people in terms of level and mix of disciplines.	1	2	3	4	5
f. The exercise achieved its identified objectives.	1	2	3	4	5
g. The exercise achieved my personal exercise objectives.	1	2	3	4	5

### 2. What changes would you make to improve this exercise?

*Please provide any recommendations on how this exercise or future exercises could be improved or enhanced.*