

Health and Medical Division  
**Activity Evaluation**

Name of Activity:

Date:

Location:

Please check all applicable answers

1. I recommend:

- We have the activity again next year
- and make it an Annual Event.
- We not have this activity again

2.  The activity focus on a certain age group

- |  |   |
|--|---|
| <input type="checkbox"/> 4-6 graders   | <input type="checkbox"/> 7-9 graders                  |
| <input type="checkbox"/> 10-11 graders | <input type="checkbox"/> tribal employees             |
| <input type="checkbox"/> adults        | <input type="checkbox"/> Diabetics                    |
| <input type="checkbox"/> other:        | <input type="checkbox"/> Doesn't matter to my program |

3. Next year, we focus on:

- Health Careers
- Health education
- Interactive health education
- Program education
- All of the above
- Doesn't matter to my program
- Other suggestions:

4. Suggested locations:

- Ginger Lynn Welch Community Room
- Harrah's
- Great Smoky's Convention Center
- Cherokee Elementary School Gym
- Cherokee High School

5. I estimate my program spent:

- < \$100
- > \$100
- > \$200
- > \$300

6. I estimate my program invested:

- <2 hrs. of time preparing for this activity
- <4 hours of time
- < 10 hours
- > 15 hours

7. The facilities/arrangements:

- bathrooms were clean
- tables were arranged well
- lunch was good
- let's eat out next year
- table banners were adequate
- floors were clean
- tables and chairs were adequate

8. Next year let's

- keep it an HMD event
- invite hospital programs to participate
- invite other tribal programs
- invite area health programs (Jackson, Swain, etc)
- invite private enterprises (Visage, Massage Therapists, etc.)

. Please list some of your concerns, suggestions, ideas, comments: