



RPSGB Branch Meeting Feedback Form

The RPSGB evaluates its activities to ensure that it continues to meet the needs of its members. As you have recently attended an RPSGB Branch meeting we are keen to get your feedback on this event so that we may continue to improve upon our services for the pharmacy profession.

We appreciate your time in completing this short feedback form.

Please return to the Branch Secretary or other Branch Officer.

Date of Meeting:

Name of Speaker:

Title of Talk:

1. What were your objectives in attending this meeting?					
2. Please indicate the extent to which you agree/disagree with the following statements:					
i. My objectives were met	Strongly disagree	Disagree	Undecided	Agree	Strongly agree
	1	2	3	4	5
ii. This meeting contributed towards my continuing professional development	Strongly disagree	Disagree	Undecided	Agree	Strongly agree
	1	2	3	4	5
iii. The presentation was relevant to my practice	Strongly disagree	Disagree	Undecided	Agree	Strongly agree
	1	2	3	4	5
3. How would you rate the quality of the presentation?	Extremely poor	Below average	Average	Good	Extremely good
	1	2	3	4	5
4. How would you rate the quality of the venue and refreshments?	Extremely poor	Below average	Average	Good	Extremely good
	1	2	3	4	5
5. Please indicate your area of practice: Community [] Hospital [] Academic [] Primary care [] Industrial [] Other []					

Continued over....



Additional comments or suggestions for future meetings

List here:

Note: Should you prefer to remain anonymous, please do not complete below:

Name	
Email address	
Address	