



Category

NRC PUBLIC MEETING FEEDBACK

Meeting Date: _____ Meeting Title: _____

In order to better serve the public, we need to hear from the meeting participants. Please take a few minutes to fill out this feedback form and return it to NRC.

1. How did you hear about this meeting?

- NRC Web Page
- NRC Mailing List
- Newspaper
- Radio/TV
- Other _____

- | | <u>Yes</u> | <u>No</u>
(Please explain below) | <u>Somewhat</u> |
|--|--------------------------|-------------------------------------|--------------------------|
| 2. Were you able to find supporting information prior to the meeting? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Did the meeting achieve its stated purpose? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Has this meeting helped you with your understanding of the topic? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Were the meeting starting time, duration, and location reasonably convenient? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Were you given sufficient opportunity to ask questions or express your views? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Are you satisfied overall with the NRC staff who participated in the meeting? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

COMMENTS OR SUGGESTIONS:

Thank you for answering these questions.

Continue Comments on the reverse. ↩

OPTIONAL

Name _____ Organization _____

Telephone No. _____ E-Mail _____

Check here if you would like a member of NRC staff to contact you.