Thank you for your feedback!

Rank your confidence to the statements below.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Not at all Confident</th>
<th>Somewhat Confident</th>
<th>Not Applicable</th>
<th>Confident</th>
<th>Very Confident</th>
</tr>
</thead>
<tbody>
<tr>
<td>Explaining the <strong>impacts of sugary drinks on health</strong> to others <strong>BEFORE</strong> the training</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Explaining the <strong>impacts of sugary drinks and health</strong> to others <strong>AFTER</strong> the training</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Explaining <strong>sugary drink industry tactics</strong> to others <strong>BEFORE</strong> the training</td>
<td>1</td>
<td>2</td>
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<tr>
<td>Explaining <strong>sugary drink industry tactics</strong> to others <strong>AFTER</strong> the training</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

What are the three most valuable things/resources you learned from today’s training?
1. 
2. 
3. 

How could this training be improved?

Will you be sharing the information you learned in today’s training with others?  □ Yes  □ No
If yes, who do you plan to give this training to? (Please be specific)

What other resources would be helpful?

Would you like to be added to our mailing list for training and volunteer opportunities related to sugary drinks?  □ Yes  □ No
If yes, please provide your contact information. Please print legibly.

Name  
Email  
Phone  
Organization  

Additional Comments

Thank you for your feedback!