



Event/Activity Record – Participant survey

If you have taken part in an event or activity for the NE Better Health at Work Award, we would be interested in your feedback.

Please take a couple of minutes to complete this short questionnaire.

Event/Activity title:

Date of activity:

2. Gender:

Male

☐

Female

☐

3. Age:

18-30

☐

31-45

☐

46-60

☐

61+

☐

4. Postcode:
(optional)

5. Department/Section:

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6. Why did you take part?

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7. What did you like most?

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8. What did you like least?

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9. Is there anything you would do to improve the event/activity?

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10. What lifestyle change will you make as a result of the event/activity?

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Any other comments (e.g. additional information, suggestions for future events or activities)?

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**Please return to your Health Advocate or
*Insert email***

Thank you

