MEMBERSHIP



SURVEY

Dear MWDA member,

In an effort to better serve our membership, we are requesting that you fill out and return the attached survey at your earliest convenience. It is very important that we hear from you so we can continue charting a course that makes our organization so successful! We thank you in advance for your assistance in completing this survey and look forward to reading the results. Please use the reverse side of this form if you need additional space.

Sincerely, MWDA, Executive Committee

Rank the following it Important)	ems concerning the <u>Sp</u>	ring Trainin	g Semina	ar from 1	(Most In	portan	t) to 7 (Le	ast
Put a check mark in the appropriate ranking box for each item below. A ranking should be used only once. For example, only one thing can be the most important.		e. 1	2	3	4	5	6	7
Cost								
Duration and time of year of Conference								
Educational Offerings								
Location								
Networking								
Quality of Accommodations								
Social Activities								
Other (explain what other is)								
Comments or explan	ation of "Other":							
Does the Organization	on meet your expectat	cions? Check	off appro	priate bo	x below.			
	٥							
Outstanding	Good	Fair	Fair		Some-what		Not at All	
Comments:								
What type of educational offerings would be most helpful to you?								
Give us your ideas:								