

LEARNING THE ROPES FOR LIVING WITH MCI® PARTICIPANT FEEDBACK

We would appreciate your feedback about the Learning the Ropes program. Please place a mark in the box corresponding to your opinion about the following:

	Strongly Agree	Agree	Somewhat Agree	Disagree	Strongly Disagree
① The information was clearly presented.					
② The participant workbook is a helpful resource and continues to be useful to me.					
③ I have maintained my use of a 'memory organizer' to track appointments, things to do, and as a place to store temporary and permanent information.					
④ I use the memory strategies taught in the program daily.					
⑤ I Feel my everyday memory function has improved through my use of the memory strategies taught in the program.					
⑥ As a result of participating in this program I am making more time to engage in recreational activities I enjoy.					
⑦ I would recommend this program to a friend.					

What memory strategy, or strategies, from the program do you use the most?

DATE:



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As a result of your participation in this program did you make any changes regarding healthy lifestyle habits, such as improvements in your diet, level of physical activity, amount of participation in socially or cognitively engaging activities, or stress management?

YES NO

If yes, what improvement(s) did you make? Please briefly describe.

Additional comments / feedback about the program.

DATE:

