

LEAD Group Name:	Group Name: Today's Date:				
Training Location: (town, county, state)					
Please rate the degree to which you level of knowledge in each of the following areas increased as a result of the sessions:					
Item	No Change	Slight Change	Moderate Change	Considerable Change	Greatly Expanded
Building a partnership that includes the right mix of partners		J			
Exploring strengths and challenges					
Writing SMART goals					
Developing a Plan of Action					
Thinking through common challenges					
What has been the most significant thing that has come from LEAD so far?					
What suggestions do you have for improving the LEAD Process?					
What additional topics or technical assistance would be of value to your team?					