Online with the CMC Evaluation

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| --- | --- |
| Your name |  |
| Library name |  |
| Library system |  |
| Type of Library (public, school, special, system, academic) |  |
| Was this session informative? (yes or no) |  |
| Was there anything not covered? (Please specify) |  |
| Do you have any unanswered questions on this topic? |  |
| Are there any topics that you would like us to discuss in the future? |  |
| Other comments |  |