

Appendix C – Feedback Form for Study Group Participants

Study Group PARTICIPANTS – Comments about Study Group Manual

Your feedback is important in order to continue to offer tips and key information to future study groups. Please complete the information on this form, and mail it, fax it or e-mail it to the CNA Certification Program. All suggestions will be reviewed and considered for inclusion in future versions of this document. All information will be kept strictly confidential and will be used solely for the purpose of the CNA Certification Program.

Location of study group: _____

Number of nurses in the study group: _____

Study group specialty: _____

Comments/Suggestions about the study group manual:

Tips for other study groups:

Thank you

Fax: 613-237-3520 E-mail: certprogram@cna-aiic.ca Mail: 50 Driveway, Ottawa, ON K2P 1E2