

**North Carolina Council on Developmental Disabilities (NCCDD)
Jean Wolff-Rossi Fund for Participant Involvement (Rossi Fund) Survey**

Welcome home! Please fill out this questionnaire and then complete your Rossi Fund Reimbursement Form. The information you provide will help us to improve the Jean Wolff-Rossi Fund for Participant Involvement process in the future.

Your name:

Name of event:

Date of event:

1. Did this event improve your knowledge, networking, or skills to be a better self-advocate and/or to improve the lives of people with developmental disabilities?

YES MAYBE NO

2. Would you recommend this event to someone else?

YES MAYBE NO

3. What will you do with what you learned at this event?

4. How did you find out about the Rossi Fund? (Check one)

Brochure NCCDD Website Local Organization/Agency Friend/Relative

Other:

5. How can we make the Rossi Fund better?

6. May we use your comments about the Rossi Fund in NCCDD publications or on the Council website?

Yes No

Thank you for filling out this survey on the Jean Wolff-Rossi Fund for Participant Involvement. If you would like to provide additional feedback, need assistance, or have questions about this survey please contact:

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