

Required Registration Questions

1.	Race/Ethnicity
	 □ White alone □ Black or African American Alone □ American Indian and Alaska Native alone □ Hispanic/Latino □ Asian Alone □ Native Hawaiian & other Pacific Islander alone □ Two or more races □ Race unknown
2.	What is your gender?
	□ Male□ Female□ Prefer not to answer
	l identify as a(n): ☐ Individual with a developmental disability ☐ Parent, family member, or legal guardian ☐ Professional ☐ Other Where do you live? ☐ Urban area ☐ Rural area
Requi	red Evaluation Questions
	 I identify as a(n): ☐ Individual with a developmental disability ☐ Parent, family member, or legal guardian ☐ Professional ☐ Other After attending this activity/event, are you able to speak up (advocate) for yourself or those around you?
	□ Yes □ No □ Idon't know

3. Do you participate in other advocacy activities and/or events?		
☐ Yes☐ No		
4. Are you part of a group or board that works on disability issues? If yes, please list them.		
☐ Yes ☐ No Comments:		
5. Do you hold a leadership role in your workplace or community? If yes, please list them.		
☐ Yes ☐ No Comments:		
6. Did you learn something new from this activity/event?		
☐ Yes ☐ No Comments:		
 7. Were you happy with this activity/event? Yes No Somewhat 		
Comments:		
8. One thing I liked most about this activity/event was:		
9. This activity/event would have been better if:		
10. Please share a short statement of how this activity/event affects you or someone you know		
Updated September 2025.		