

Safe Driving and the Older Adult Scssion Evaluation

SESSION TITLE: Five Simple Actions to Improve Driving (NHTSA DriveWell Curriculum)

Please take a moment to evaluate today's session on Older Driver Safety. Because this is a federally-funded program, we are required to provide statistics to the National Highway Traffic Safety Administration on how the material is affecting our attendees. Any personal information you choose to list on this form becomes property of the Oklahoma County Sheriff's Office, and will remain strictly confidential.

How interested are you in learning more about safe driving for older adults?	Very interested	Somewhat interested	Possibly Intereste in the future	d Not at all
Please rate today's session information:	Excellent	Very good	Okay	Not helpful
How likely are you to use the information you heard today in your daily life?	e Very Likely	Somewhat Likely	Possibly Likely in the future	Not at all
Would you be interested in sharing this information with a friend or family member?	Very Interested	Somewhat Interested	Possibly Interested in the future	Not at all
Name (optional):			Gender (optional):	M F
Age range (optional): 4	0-50 50-60	60-70	70-80 80-90	90+
On average, how many days of the week do you drive? Every day 4-6 1-3 None				
Are you fully or partially responsible for driving someone else? Yes No				
Additional Comments/Suggestions:				