



The Predator Awareness Task Force

FINANCIAL SAFETY
Participant Evaluation

Name (Optional) _____ Date of Training: _____

Name of your program or school _____



NO



YES

I found this training useful

I enjoyed this training

I learned what financial safety is

I learned who I can tell if I feel unsafe

I learned how to keep my money safe

I learned something new today

What other safety topics would you like to have more training on?

Other comments:

Please return to: Dana Zapanta, SCOE
8511 Liman Way Rohnert Park, CA 94928

dzapanta@scoe.org
fax: 707-792-4566