**b7 LEADER’S FEEDBACK**

****

|  |  |
| --- | --- |
| **Leader’s Name:**  **Date:** | **Group Number:**  **Location:** |

**What was good?**

Did you feel equipped to lead your b7 group?

**What could be improved?**

Thinking back on your experience leading this study, is there something that might have helped you feel more prepared?

**Please hand in at the front of the lecture hall after b7.**

**b7 LEADER’S FEEDBACK**

****

|  |  |
| --- | --- |
| **Leader’s Name:**  **Date:** | **Group Number:**  **Location:** |

**What was good?**

Did you feel equipped to lead your b7 group?

**What could be improved?**

Thinking back on your experience leading this study, is there something that might have helped you feel more prepared?

**Please hand in at the front of the lecture hall after b7.**