We want to ensure that each participant’s learning experience at the Federal Reserve Bank of New York is relevant, timely, and meaningful. Therefore, we would appreciate if you would take a few minutes to answer the following questions, and provide specific comments on the effectiveness of each speaker, the relevance of each topic, and the quality of handouts and/or audiovisual aids.

- Were your objectives in attending this seminar met?  
  - Yes  
  - No
- Did the handout materials contribute to achieving your learning objectives?  
  - Yes  
  - No
- Was appropriate time allocated to each segment?  
  - Yes  
  - No
- Were audiovisual materials effective?  
  - Yes  
  - No

What sections of the class did you find the most useful?  
__________________________________________________________________________

What sections of the class did you find least useful?  
__________________________________________________________________________

What additional topics would you like addressed?  
__________________________________________________________________________

Please rate the individual speaker by taking into account the content of the presentation and the speaker's presentation skills on a scale of 1 through 5 with 5 being the best.

<table>
<thead>
<tr>
<th>Presenter</th>
<th>Section</th>
<th>Content</th>
<th>Presentation Skills</th>
</tr>
</thead>
<tbody>
<tr>
<td>Corona Johnson Brissett</td>
<td>FR Y-7</td>
<td>1 2 3 4 5</td>
<td>1 2 3 4 5</td>
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<tr>
<td>Diana Hall</td>
<td>FRBNY’s FR Y-7 Review</td>
<td>1 2 3 4 5</td>
<td>1 2 3 4 5</td>
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</tbody>
</table>

Overall rating of the seminar on a scale of 1 through 5 with 5 being the best ______

We would appreciate any other comments:  
__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Thank you for completing the evaluation form. Your comments and suggestions will help us to improve future seminars.

Name (optional): ______________________ Phone number (optional): ______________________