# Session evaluation form

*Below you will find a few questions regarding how you experienced the session. Thank you for your input!*

| *Please mark the answer that best represents your experience:* | Bad/not much 🔴 | Mediocre/ a little 🟠 | Okay/ somewhat 🟡 | Good/ plenty 🟢 | Great/ very much 🟢 | *Elaborate: (optional)* |
|---|---|---|---|---|---|---|
| 1. What did you think of the content of the session? | | | | | | |
| 2. To what extent did the session match your energy level? | | | | | | |
| 3. To what extent did you find the session inspiring? | | | | | | |
| 4. To what extent did you learn something new during the session? | | | | | | |
| 5. Did the workshop sufficiently align with your knowledge and expertise? | | | | | | |
| 6. To what extent do you feel involved with developing a self-compassion app for people with cancer? | | | | | | |
| 7. Do you feel like you have influence over the design of the self-compassion app? | | | | | | |
| 8. How did you experience collaborating with different people (people with cancer, nurses, researchers, designers)? | | | | | | |

*What did you find the nicest, best or most valuable about the session?*

……………………………………………………………………………………………………………………………………………………………………

……………………………………………………………………………………………………………………………………………………………………

*Did the session meet your expectations?*

……………………………………………………………………………………………………………………………………………………………………

……………………………………………………………………………………………………………………………………………………………………

*Do you have any suggestions for improvement?*

……………………………………………………………………………………………………………………………………………………………………

……………………………………………………………………………………………………………………………………………………………………