Health Council Training Record

Health Council Name:	Date of Training:
	Bate of framing

Name of Training:

- 1. Was this training valuable in strengthening the capacity and structure of the health council?
 - \Box Yes or \Box No
 - Please explain why in 2-3 sentences.
- 2. What new insights did this training bring into the current focus of the health council?
- 3. What additional resources would the health council need to implement elements from this training?
- 4. How will this training impact the work of the health council moving forward?
- 5. How will the health council share information from this training with other health council members?
- 6. What additional questions do you have after attending this particular training?
- 7. What other topics would the health council like to receive training on?