



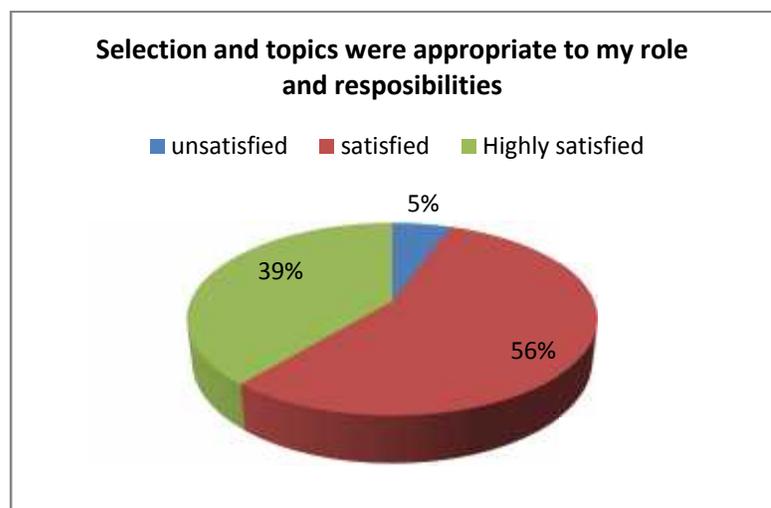
IP MED: Study Visit Training Satisfaction Questionnaire Result

This feedback form has been prepared to understand better your satisfaction level of the training carried out in order to understand which were the very positive aspects but also the aspects for improvement and thus, to prepare you the next training better according to your needs.

1. The objectives of the training were clearly defined



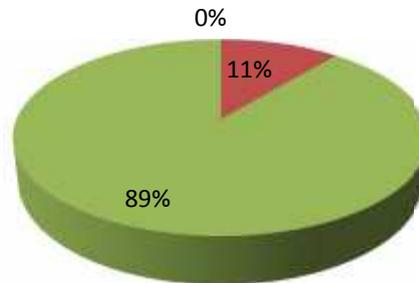
2. Selection and topics were appropriate to my role and responsibilities



3. The training improved my understanding of the subject

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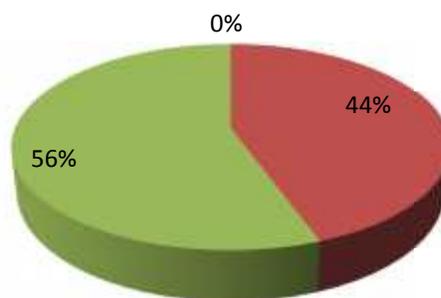
■ unsatisfied ■ satisfied ■ Highly satisfied



4. I will be able to apply the knowledge acquired

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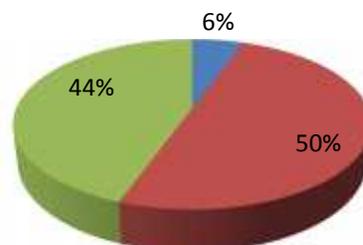
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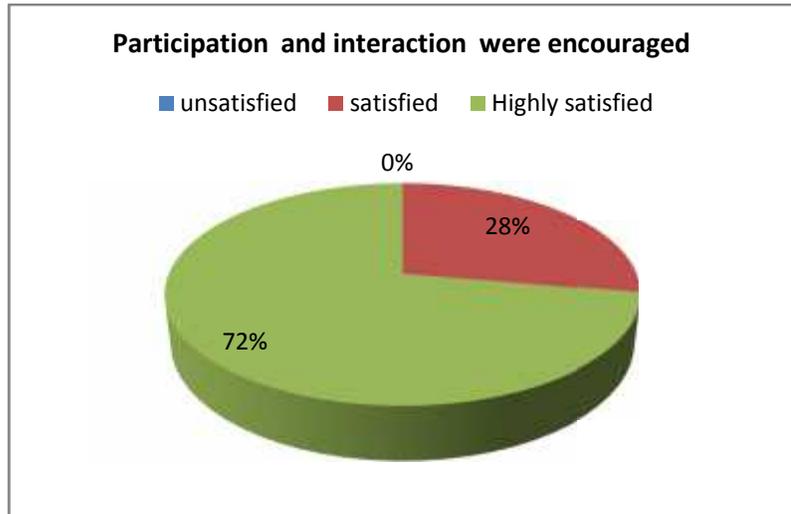
5. Visual and supporting material were useful and easy to follow

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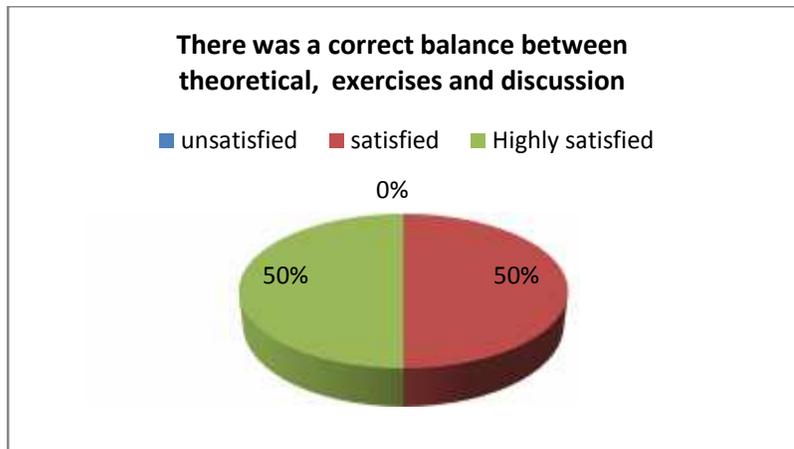
■ unsatisfied ■ satisfied ■ Highly satisfied



6. Participation and interaction were encouraged



7. There was a correct balance between theoretical, exercises and discussion



8. The trainers were well prepared



9. The training objectives were met



10. Overall evaluation of the training



Which topics would you suggest for future trainings?

- Trademark
- Quality assurance in specific IP topics

Which aspects do you think could be improved for the next training?

- Sending follow-up examples of specific competences and learning outcome