

Host & Participant Feedback Form

Turn in to your host or take pictures and email them to $\underline{\text{feedback@livingroomconversations.org}}$ \square you may use my photo in materials for Living Room Conversations

Conversation type: ☐ in person ☐ video	How would you classify yourself politically?
Name: Email:	
Name of host:	
Topic:	
City:State:	conservative () () () () liberal
Generally, how comfortable are you talking about politic	cized topics with people who are different from you?
Very Uncomfortable 🔾 🔾 🔾	O O O Very Comfortable
How comfortable did you feel discussing the topic of	your Living Room Conversation with this group?
Very Uncomfortable () () () () Very Comfortable	
Did you enjoy the Living Room Conversation experience?	
I thought it was extremely valuable $\bigcirc\bigcirc\bigcirc\bigcirc\bigcirc\bigcirc\bigcirc$ I do not think it was valuable	
How likely are you to recommend your family/ frie	ends engage with Living Room Conversations?
I will absolutely recommend $\bigcirc\bigcirc\bigcirc\bigcirc\bigcirc\bigcirc\bigcirc$ I would not recommend this	
What relationship do you feel towards	s the people in your conversation?
More understanding/appreciation $\bigcirc\bigcirc\bigcirc\bigcirc\bigcirc\bigcirc\bigcirc$ Less understanding/appreciation	
Did you learn or become aware of something valuable during t ☐ yes	he conversation
□ no	
What did you learn? What was valuable to you?	
How do you feel about these kinds of conversations in the futu	ire?
☐ I want to co-host my own	
☐ I would like to be a participant in another conversation ☐ I would rather not have these kinds of conversations again	
Can we follow up with you? ☐ Yes! Keep me updated on Livir	ng Room Conversations notices and research.
Additional comments:	