A. Demographic Information:

Employment Status:  
1. Full-time  
2. Part time  
3. Inactive  
4. Retired

Position in Pharmacy:  
1. Owner  
2. Administrator  
3. Manager  
4. Supervisor  
5. Employee  
6. Staff

In what professional Environment do you work?  
2. Independ.  
3. Comm. Pharm. Chain  
4. Industry  
5. Hospital  
6. Managed Care  
7. Consultant Pharmacist  
8. Other

In what year did you graduate?  

Is this the first of our home-study courses you have completed?  
1. Yes  
2. No

Gender?  
1. Female  
2. Male

Will you be likely to purchase similar courses in the future?  
1. Yes  
2. No

B. Evaluation:

Please indicate your degree of agreement with each statement as it applies to the courses using the following scale:

<table>
<thead>
<tr>
<th>Strongly agree</th>
<th>Mildly agree</th>
<th>Mildly disagree</th>
<th>Strongly disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
</tr>
</tbody>
</table>

The information presented in the course will be useful in my practice.

The information was covered in sufficient detail.

The home-study format was convenient to use.

The test questions were representative of the material covered.

I would recommend this home-study CE course to a colleague.

Did you study any lessons more than once?  
1. Yes  
2. No

If yes, comments:

Please rate the lesson according to the scale

<table>
<thead>
<tr>
<th>Excellent</th>
<th>Good</th>
<th>Fair</th>
<th>Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
</tr>
</tbody>
</table>

C. Credit Assessment and Rating

Please indicate the amount of time you spent studying the lesson:  

D. Suggestions and Comments:

Please list any topics that you would like to have presented in the format, or any general comments you may have.

Thank you for your continued support!