



## Distracted Driving Simulator Evaluation Form

Thank you for your interest in the Distracted Driving Simulator offered by your Southern Minnesota Trauma Advisory Committee's Injury Prevention Program.

Please fill out this evaluation form at the completion of your event.

1. How many people attended your event?
2. Please describe any issues you had assembling the equipment
3. Did you have any difficulties operating the software program, if so describe:
4. Do you feel this is a valuable injury prevention tool to have available?
5. Feel free to provide any other feedback:

Thank you!