Film Evaluation of Waking in Oak Creek

Please answer the following questions based on your recent viewing of Waking in Oak Creek. Thank you for your participation.

1. Screening location: ____________________________________________________________

2. How would you rate the following in reference to this film?

<table>
<thead>
<tr>
<th>Item</th>
<th>Excellent</th>
<th>Good</th>
<th>Okay</th>
<th>Fair</th>
<th>Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Handling of topic presented</td>
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<tr>
<td>b. Overall impact of film</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>c. Effectiveness of group discussion (if applicable)</td>
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</tr>
</tbody>
</table>

3. Please check the response that is most accurate for you.

<table>
<thead>
<tr>
<th>Results of viewing this film</th>
<th>Yes, very much</th>
<th>Yes, somewhat</th>
<th>No, didn't make a difference</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. I have more information or tools I can use in my work.</td>
<td></td>
<td></td>
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<tr>
<td>b. I better understand the need to support hate crime victims.</td>
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<tr>
<td>c. I have better ideas for building relationships between diverse groups and faiths in my community.</td>
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<tr>
<td>d. I will seek ways to improve relationships between community leaders, interfaith groups, and law enforcement.</td>
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<tr>
<td>e. I am more likely to take action to address hate and intolerance in my community.</td>
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</tr>
</tbody>
</table>

4. What opportunities or challenges do you anticipate in showing this film to your community or law enforcement agency?
5. What additional information or supplemental resources would you like to see presented in films and discussions to support your training and outreach efforts?

6. Additional comments?

7. Demographic information: We request the following information to help us understand and better serve our audience.

a. Gender
   ○ Male
   ○ Female
   ○ Other

b. Age
   ○ 12 or younger
   ○ 13–18
   ○ 19–25
   ○ 26–35
   ○ 36–45
   ○ 46–55
   ○ 56–65
   ○ 66+

c. Race/Ethnicity
   ○ African American (non-Hispanic)
   ○ Asian
   ○ Hispanic
   ○ Native American
   ○ Pacific Islander
   ○ White
   ○ Other: _____________________

d. Constituency
   ○ Civic leader
   ○ Community member
   ○ Educator
   ○ Faith group member
   ○ Law enforcement
   ○ Student
   ○ Other _____________________

e. Occupation:
   _______________________________

Would you like to get more resources or updates from Not In Our Town? If yes, please provide:

Name: ______________________________________________________________________________________________

Phone: ______________________________ E-mail: ____________________________________________________________

Thank you for your participation.

For more information on how to prevent hate, intolerance, and bullying in your community, please visit the Not In Our Town website at www.niot.org.

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