**MDR Feedback form**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | ***Strongly agree*** |  | ***Agree*** |  | ***Disagree*** |  | ***Strongly disagree*** |
| **In preparing…** |  |  |  |  |  |  |  |  |
| I found the Reflection Aid helped me focus  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| The external perspectives were helpful |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| **My Reviewer…** |  |  |  |  |  |  |  |  |
| Listened and helped me to discern |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| affirmed me appropriately |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| challenged me appropriately |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| **As a result of my Review** |  |  |  |  |  |  |  |  |
| I have developed new insights  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| I have new goals and priorities |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| I have identified the resource/support / I require |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |

**Reviewer: Reviewee: Date:**

**Please comment overleaf, if you wish on:**

1. What other feedback have I to offer my reviewer?
2. What other feedback can I offer the Review Process?

Please return this form to*marleen.madinda@dioceseofnorwich.org*