- 1. Name of a participant (Optional)
- 2. You participated as a:

Mentor (Market expert) Mentor (Circular design) Company

3. Did the event met your expectations? * Yes, it did It rather did It somewhat did Not really Not at all Other:

- 4. What did you like about the event? *
- 5. What could have been done differently?
- 6. Would you be interested in participating in similar events again in the future? *

Yes No Maybe