

**'HAVE YOUR SAY'**  
**MORNINGTON PENINSULA ACCESS & MOBILITY STUDY**  
**WORKSHOP**  
**TUESDAY 6 FEBRUARY 2007**



# SUBMISSION SHEET

We are interested in receiving your feedback to this workshop so that we can improve our programs and ensure that the needs of our community are met.

Please assist us by completing this submission sheet and leaving it on your seat or table for collection at the end of the night. You do not need to provide us with your contact details, however, if you would like to receive information regarding the final report for MPAMS, it is advisable.

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Please read through each statement below and tick the box which corresponds most closely to your experience tonight.

• **The information session/workshop was informative.**

Strongly agree     Agree     Uncertain     Disagree     Strongly disagree

• **The speakers presented well**

Strongly agree     Agree     Uncertain     Disagree     Strongly disagree

• **The use of program materials, such as video/overhead projector/forum discussion made the program more interesting**

Strongly agree     Agree     Uncertain     Disagree     Strongly disagree

• **Was the public transport easily accessible for this venue? How could this be fixed?**

Strongly agree     Agree     Uncertain     Disagree     Strongly disagree

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**How did you find out about the program?**

Newspaper article     Invitation     Advertisement     Media Release     E-mail  
 Other \_\_\_\_\_

**Your comments on the issues & themes raised by MPAMS Draft Plan would be appreciated.**

1. Population & Travel growth Trends:

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2. An Aged & Ageing Population:

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3. Social Inclusion:

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4. Improving Access to Public Transport:

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5. Managing Visitor Peaks:

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6. Environment & Amenity Protection:

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7. Facilitating Efficient Freight Movement:

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8. Improving Transport Safety:

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Further Comments (any further comments can be emailed to [con.efremidis@frankston.vic.gov.au](mailto:con.efremidis@frankston.vic.gov.au)):

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**Are you interested in receiving further information about the MPAMS when the final report is completed?**

If yes, please include your contact details below.

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Post Code

Ph \_\_\_\_\_

Email \_\_\_\_\_

Thank you for taking the time to complete this evaluation sheet. Your comments are appreciated 😊