ARTS AWARD SCHEME



# **FEEDBACK FORM**

### To be completed by all individuals in receipt of an Arts Award

Full Name

Address

Post Code

Tel No (Day) (Evening)

Age Date of Birth

Course attended

From To

Please give a brief outline of what you feel you gained from attending this course

**Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please return this form to: Lesley Smith

Team Manager Arts

East Lothian Council

Brunton Hall

Ladywell Way

Musselburgh

EH21 6AF