## **Diversity and Inclusion Feedback Survey**

Name (optional)
Email (optional)
Department/Team
Do you feel valued and respected as a member of this organization?
C Yes C No C Not sure
Do you believe the organization actively promotes diversity and inclusion?
C Yes C No C Not sure
Have you experienced or witnessed any barriers to diversity and inclusion here? If yes, please describe.
What suggestions do you have for improving diversity and inclusion in our organization?
Any additional comments or feedback?