
Assessment 11-3**Needs Assessment Discussion Form**

Instructions: Use this sheet to prepare your comments for the focus group discussion. Write your first thoughts in response to each question. You may change your responses as the discussion progresses. Please do not write your name on this form. The facilitator will collect the form at the conclusion of the session.

1. How would you describe the time management skills of people in the organization?
2. What behaviors have you observed in terms of others' organizational skills?
3. What level(s) of employees do you think would benefit from time management training? Why?
4. Would you like to receive training to improve your own time management skills?
5. Do you think others in the organization would like to receive time management training?
6. What challenges or roadblocks may be present in the organization that could affect the success of a time management training session?
7. What would you personally like to see included in a time management training session?
8. How would you prefer that training be offered to you? (circle one)
 - a. Private, individual instruction
 - b. Half-day group session
 - c. One-day group session
 - d. Multi-day group session
 - e. No preference

Thank you for your cooperation in this needs assessment.
