



Policy Feedback Form

Name:

Date:

Assigned Position and Group Representing (if applicable):

Policy Background:

1. Guiding question/statement?

Comment:

2. Guiding question/statement?

Comment:

3. Guiding question/statement?

Comment:



Policy Feedback Form

4. Guiding question/statement?

Comment:

5. Guiding question/statement?

Comment:

Recommendations:

Forward to policydevelopment@rockyview.ab.ca