



Common Instrument Interface Workshop 1 Feedback Form



Initiator Name: _____

Organization: _____

Phone: _____

Email: _____

Concern: _____

Recommendation: _____

The CII Team will post all concerns and responses on our public website. CII will not attribute the concern to the initiator unless initialed below.

____ Initial here if you want the public CII website to indicate your name and organization.