

# Teambuilding Survey

Group Name: \_\_\_\_\_ Date of Program: \_\_\_\_\_ Contact Person: \_\_\_\_\_ Contact's Day Phone # \_\_\_\_\_

	Not Needed	Somewhat Needed	Needed	Strongly Needed
<b>Communication</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<i>Comments:</i>				
<b>Acceptance</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<i>Comments:</i>				
<b>Unity</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<i>Comments:</i>				
<b>Mutual Trust and Respect</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<i>Comments:</i>				
<b>Leadership</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<i>Comments:</i>				
<b>Setting Goals</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<i>Comments:</i>				
<b>Teamwork</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<i>Comments:</i>				

*Please complete the following survey and mail or fax back to Group Dynamix. Your selections and comments will help us design your program.*

**Mail:** GDx, 1215 Trend Drive, Carrollton, TX 75006 **Fax:** 972-416-8992