

# Evaluation questionnaire

**1. Gender**

- a) Male
- b) Female

**2. How old are you?**

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**3. After our campaign, do you plan to drive under influence of alcohol?**

- a) Yes
- b) No
- c) Maybe

**4. In future, would you agreed to bi driven by someone who is drunk?**

- a) Yes
- b) No

**5. Did our campaign impact on you?**

- a) Yes
- b) No

**7. Comment about campagn**

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**8. Are you planning to impact on others no to drive under influence?**

- a) Yes
- b) No