



Workshop Title: _____ Date: _____

Please indicate your strong agreement (5) or disagreement (1) by circling the appropriate number on the continuum from 1 to 5.

The workshop met its stated objectives.	1	2	3	4	5
The workshop content met my needs.	1	2	3	4	5
The presenter was knowledgeable in the content area.					
_____	1	2	3	4	5
_____	1	2	3	4	5
_____	1	2	3	4	5
Material was presented clearly.	1	2	3	4	5
Material was presented effectively.	1	2	3	4	5
Material was appropriate for attendee.	1	2	3	4	5
Teaching methods, aids, and audiovisuals were helpful.	1	2	3	4	5
Presenter clarified content in response to questions and comments.	1	2	3	4	5
_____	1	2	3	4	5
_____	1	2	3	4	5
_____	1	2	3	4	5

This course was valuable to me because: *(check all that apply)*

- _____ I learned a new skill or approach to use in my practice.
- _____ I acquired one new and/or advanced skill that I can implement in my area of practice.
- _____ I gained knowledge upon which to base my decisions and actions in the practice.
- _____ This workshop doesn't apply to me on my job.
- _____ Other: _____

What information was the most valuable to you in this workshop?

If the workshop were repeated, what should be left out, changed, or added?

What other topics would you like to see presented?

Other comments are gratefully appreciated. Please use reverse side of this form.
