Workshop Evaluation Form

Your feedback is critical for our Inset to ensure we are meeting your educational needs. We would appreciate if you could take a few minutes to share your opinions with us so we can serve you better.

**Please return this form to the instructor or organizer at the end of the workshop. Thank you.**

Workshop title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Instructor:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Strongly Strongly**

**agree disagree**

1. The workshop was applicable to my job 1 2 3 4 5
2. The program was well paced within the allotted time 1 2 3 4 5
3. The instructor was a good communicator 1 2 3 4 5
4. The material was presented in an organized manner 1 2 3 4 5
5. The instructor was knowledgeable on the topic 1 2 3 4 5
6. I would be interested in attending a follow-up, more

advanced workshop on this same subject 1 2 3 4 5

1. Given the topic, was this workshop: ❑ a. Too short ❑ b. Right length ❑ c. Too long
2. In your opinion, was this workshop: ❑ a. Introductory ❑ b. Intermediate ❑ c. Advanced

# Please rate the following:

Excellent Very Good Good Fair Poor

1. Visuals ❑ ❑ ❑ ❑ ❑
2. Acoustics ❑ ❑ ❑ ❑ ❑
3. Meeting space ❑ ❑ ❑ ❑ ❑
4. Handouts ❑ ❑ ❑ ❑ ❑
5. The program overall ❑ ❑ ❑ ❑ ❑

12. What did you most appreciate/enjoy/think was best about the course? Any suggestions for improvement?

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**OVER, Please** 🡺🡺🡺

**Future Needs**

1. I would be able to do my work better if I knew more about \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Please describe the top two topics you would like to learn more about in the next 12 months:

Topic 1:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred level: ❑ a. Introductory ❑ b. Intermediate ❑ c. Advanced

Preferred format: ❑ a. Seminar/workshop (how many days?\_\_\_\_\_\_\_\_\_)

❑ b. Self-study materials

❑ c. Interactive distance learning (i.e., Web-based)

❑ d. Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Topic 2:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred level: ❑ a. Introductory ❑ b. Intermediate ❑ c. Advanced

Preferred format ❑ a. Seminar/workshop (how many days?\_\_\_\_\_\_\_\_\_)

❑ b. Self-study materials

❑ c. Interactive distance learning (i.e., Web-based)

❑ d. Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Thank you!**

# Please return this form to the instructor or coordinator at the end of the workshop.

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