

2015-2016 WORKSHOP EVALUATION FORM

Workshop Title: _____

Today's Date: _____ Name of Presenter/s: _____

For the following areas, please indicate your rating:

	1	2	3	4
A. Content	Fair	←————→		Excellent
Covered useful material				
Practical to my needs and interests				
Well organized				
Well paced				
Presented at the right level				
Effective activities				
Useful visual aids and hand-outs				
B. Presentation				
Instructor's knowledge				
Instructor's presentation style				
Instructor covered material clearly				
Instructor responded well to questions				
Instructor facilitated interactions among participants well				

C. How could this workshop be improved?	
D. Any other comments or suggestions?	

E. Overall, how would you rate this workshop?

[] POOR [] FAIR [] GOOD [] EXCELLENT