

Program Evaluation

Live Presentation

Your feedback regarding this professional development training is valuable to us for learning the effectiveness of our programs. We thank you for taking the time to respond to our survey.

Name (Optional): _____ Date: _____

Program Title: _____

Presenter: _____

Please rate the questions below on a scale of 5 (Excellent) to 1 (Very Poor)	5 Excellent	4 Very Good	3 Good	2 Fair	1 Very Poor
The content of the program met my expectations.					
The program met its stated goals and objectives.					
The length of the program was adequate to cover the required information.					
The instructor(s) was knowledgeable of the subject matter presented.					
I received an agenda and the instructor kept to the identified time frames.					
The handouts and teaching methods were well presented to impart the program information.					
I received a certificate that documented the number of PDA Points/CEU's awarded.					
I will be able to apply what I have learned in my professional life.					
Overall, how satisfied were you with the program presentation?					

What 3 points of new information did you learn?

1. _____
2. _____
3. _____

Other Comments: _____