

Program Evaluation Form

Program Title: _____

Program Date | Time: _____

Program Location: _____

Presenter(s): _____

1. Please rate the overall quality of the program:

Excellent Met Expectations Needs Improvement Did Not Meet Expectations

2. Were the stated learning objectives met?

Yes No

3. Given the subject and objectives, the length of the program was:

Too short Proper length Too long

4. Please rate the written materials provided with the program (including advance preparation materials, audio and video materials, and handouts if applicable):

Excellent Met Expectations Needs Improvement Did Not Meet Expectations

5. Were the program materials accurate, relevant, and did they contribute to the achievement of the learning objectives?

Yes No

6. Did the environment have a positive influence on your learning experience?

Yes No

7. Please rate the technological equipment:

Excellent Met Expectations Needs Improvement Did Not Meet Expectations

8. Do you have additional comments, suggestions, or program/topic recommendations?

Please rate the faculty on a scale of 1 to 5 (1 being the lowest; 5 being the highest - check one):

1 2 3 4 5

Instructor's Name: _____

Instructor's Name: _____