Name:

Speaker:

Evaluate according to the following scale: (5 = Excellent   4 = Good   3 =Acceptable 2 = Fair   1 = Poor)

Session Content	Very Satisfied		Satisfied		Not Satisfied
Correlation with presentation objectives	5	4	3	2	1
Relevance/timeliness of topic	5	4	3	2	1
Organization of activity	5	4	3	2	1
Adequacy of time allotment	5	4	3	2	1
Overall Evaluation	5	4	3	2	1
Adequacy of facilities and resources	5	4	3	2	1
Effectiveness of educational methods & teaching materials	5	4	3	2	1

To what extent did the speaker(s) encourage audience participation?

Significant   Moderate   Little   Very Little   None

Were the presentations made in a fair, unbiased, balanced manner?   Yes   No

I will be a more competent/effective professional due to this activity.

Strongly Agree   Agree   Undecided   Disagree   Strongly Disagree

Suggestions for future topics:
_____
_____
_____

Based on the program(s), what changes will you make in your practice?:
_____
_____
_____