



Workshop Evaluation Form

Workshop Title: _____

Organisation: _____

Presenter: _____

Date: _____

(Please Circle)

Question	Poor	Fair	Good	Very Good	Excellent
How much did the content contribute to your knowledge?	1	2	3	4	5
Was the content relevant to your needs?	1	2	3	4	5
Was the content delivered in an understandable fashion?	1	2	3	4	5
How well did the presenter keep the session alive and interesting?	1	2	3	4	5
Did the presenter invite and encourage participation and discussion?	1	2	3	4	5
Do you feel you can apply the content to your work or personal life?	1	2	3	4	5
Overall how would you rate this session?	1	2	3	4	5

What did you most like about the workshop?

What did you least like about the workshop?

How could this workshop be improved?

Assure Programs is committed to continuous improvement and delivering quality services. Through completing this evaluation you will assist us in refining your programs. Thank You.