**Workshop Evaluation**

**WorkshopTitle**

**Month, Day, Year**

**Location**

**YourName, YourCertifications**

Please circle a rating for each statement below.

|  |  |
| --- | --- |
|  | **Strongly Strongly**  **Agree Disagree** |
| 1. The information was presented in a clear, concise manner. | 1 2 3 4 5 |
| 1. The amount of content was appropriate for the time allotted. | 1 2 3 4 5 |
| 1. The presenter was attentive and interactive with the participants. | 1 2 3 4 5 |
| 1. Handouts and audio-visual equipment used were appropriate and helpful. | 1 2 3 4 5 |
| 1. The information presented is useful and practical and I will be able to implement the concepts I learned. | 1 2 3 4 5 |

1. What did you find most valuable in this presentation?
2. What suggestions do you have for changing/improving this seminar for future presentation?
3. What learning from this workshop will you incorporate in your life, going forward?

**Follow-Up**

* Please add me to your electronic mailing list (please provide email address below).
* Please contact me so I can learn more about how <BusinessName> could help my organization.
* Please contact me to arrange a <SessionName> strategy session.

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I prefer to be contacted by:

* Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_