

Your Logo Here

Session Evaluation

Session Title: _____

Faculty Name(s): _____

Date and Time: _____

- Please use pencil or blue/black ink.
- Fill response ovals completely - do **not** use ✓s or Xs to mark choices.



Using a scale from 1 to 5 where 5 is "Strongly Agree" and 1 is "Strongly Disagree," please evaluate the faculty/session in the following areas:

	Strongly Disagree				Strongly Agree
The session content was consistent with description in the agenda.	①	②	③	④	⑤
The session information will help me be more effective in my position.	①	②	③	④	⑤
I can use the information I learned right away.	①	②	③	④	⑤
Overall, the speakers for this session were knowledgeable.	①	②	③	④	⑤
Overall, the speakers for this session were engaging.	①	②	③	④	⑤
The session met or exceeded my expectation.	①	②	③	④	⑤
The topics covered were relevant, interesting and timely.	①	②	③	④	⑤
The session was interactive with significant audience participation.	①	②	③	④	⑤
The handouts and materials were useful.	①	②	③	④	⑤
Audio-visual aids were used effectively.	①	②	③	④	⑤

What in particular about this session would you like us to know about and why?

What are your overall impressions about the faculty at this particular session?

Approximately how many participants attended this session?

- 0-10 11-25 26-40 41-60 61-75 76 or more

Would you recommend this session for next year's conference agenda? Yes No

Would you recommend this particular faculty for next year's conference? Yes No

Why or why not? _____

Thank you!