



Jefferson Schools Workshop / Conference Evaluation Form

Date: _____

Workshop/Conference Title: _____

Instructor's Name: _____

Position: Administrator Teacher Support Staff ISD Staff

PART I - INSTRUCTIONAL METHOD

1. The Presentation was clear and to the point.
 Strongly Agree
 Agree
 Disagree
 Strongly Disagree
2. The level of the presentation was appropriate.
 Strongly Agree
 Agree
 Disagree
 Strongly Disagree
3. The presenter was responsive to participants.
 Strongly Agree
 Agree
 Disagree
 Strongly Disagree

PART II - INSTRUCTIONAL METHOD

4. The content was interesting to me.
 Strongly Agree
 Agree
 Disagree
 Strongly Disagree
5. The content had substance.
 Strongly Agree
 Agree
 Disagree
 Strongly Disagree
6. The content was relevant, up to date, & practical
 Strongly Agree
 Agree
 Disagree
 Strongly Disagree
7. The information presented will be of practical value for my job.
 Strongly Agree
 Agree
 Disagree
 Strongly Disagree

PART III - SHORT ANSWER

8. The best features of the workshop/conference was: _____

9. Suggestions for improvement of this conference: _____

10. Ideas and suggestions for future workshops: _____

11. Other comments and reactions you wish to offer: _____
