

# Workshop Evaluation Form

Presented by  
Prairie View A&M University  
Office of  
**Financial Services**

**Treasury Services, Payroll, Accounts Payable, Travel & Pro Card**

Date: \_\_\_\_\_

Your opinion is very important to our quality improvement plan. Please take a few minutes to complete this evaluation. Please circle the value that corresponds best to your opinion.

## Workshop Facility

	<u>Poor</u>	<u>Fair</u>	<u>Good</u>	<u>Very Good</u>	<u>Excellent</u>
Room contributed to the learning environment	1	2	3	4	5
Seating adequate (could see board, instructor, etc.)	1	2	3	4	5
Could hear instructor properly	1	2	3	4	5
Room temperature:	1	2	3	4	5
Room location (easy to get to, find, etc.)	1	2	3	4	5

## Instructor/Course Feedback

Please circle the value that corresponds best to your opinion.

	<u>Poor</u>	<u>Fair</u>	<u>Good</u>	<u>Very Good</u>	<u>Excellent</u>
Please rate this workshop overall	1	2	3	4	5
Course objectives were clear	1	2	3	4	5
Instructor communicates clearly	1	2	3	4	5
Effective use of training supplies & equipment	1	2	3	4	5
Course length was appropriate for material covered	1	2	3	4	5
Support materials and handouts were helpful	1	2	3	4	5
I felt free to ask questions, disagree, and express my ideas	1	2	3	4	5
I will be able to use the knowledge I have gained in my job	<u>Yes</u>	<u>No</u>			

What did you like most about the presentation? \_\_\_\_\_  
\_\_\_\_\_

What could we improve? \_\_\_\_\_  
\_\_\_\_\_

Additional Comments \_\_\_\_\_

Name (Optional): \_\_\_\_\_ Telephone (Optional): \_\_\_\_\_