

1) Evaluation Questionnaire. (Knowledge / Skills Learnt)

Name of Workshop: _____

Date: _____

PRE WORKSHOP QUESTION:

1. What do you hope to learn from this workshop?

2. How confident in your knowledge and skill in this area of work now?

<i>Not very confident</i>				<i>Neutral</i>				<i>Very confident</i>	
1	2	3	4	5	6	7	8	9	10
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

POST WORKSHOP QUESTION: Satisfaction:

3. How satisfied are you with this workshop? (Please mark the score number that you feel most closely represents your views).

<i>Not very satisfied</i>				<i>Neutral</i>				<i>Very satisfied</i>	
1	2	3	4	5	6	7	8	9	10
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. To what extent do you feel you have learned from this workshop? (Please mark the score number that you feel most closely represents your views).

<i>Learned nothing</i>				<i>Neutral</i>				<i>Learned a lot</i>	
1	2	3	4	5	6	7	8	9	10
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. What are the two most important pieces of knowledge you are taking away from this workshop?

5A. _____

5B. _____

6. What are the two most important skills you are taking away from this workshop?

6A. _____

6B. _____

7. What you plan to do with this learning on your return to work to reinforce these skills?

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8. What was least valuable about this workshop?

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9. What improvements would you recommend in this workshop/seminar?

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10. What areas would you like further information on in the future?

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RECOMMEND WORKSHOP TO OTHERS

11. Will you recommend this workshop to other staff? (Please mark the score number that you feel most closely represents your views).

<i>Definitely not</i>			<i>Neutral</i>				<i>Definitely Yes</i>		
1	2	3	4	5	6	7	8	9	10
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

12. What did you learn from this workshop today?

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13. At the end of the day, how confident do you feel in your knowledge and skills in this area of work now? (Please mark the score number that you feel most closely represents your views).

<i>Not very confident</i>			<i>Neutral</i>				<i>Very confident</i>		
1	2	3	4	5	6	7	8	9	10
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please feel free to make any other comments.

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Thank you for your time