

PROGRAM EVALUATION

Title: _____

Date of Program: _____

Did you view this program on the website? _____

Please rate the next four questions from a high of "5" to a low of "1"

- | | | | | | |
|--|---|---|---|---|---|
| 1. My overall satisfaction with the program was | 5 | 4 | 3 | 2 | 1 |
| 2. As far as my job is concerned, the program content was | 5 | 4 | 3 | 2 | 1 |
| 3. The extent to which my interest level was maintained was | 5 | 4 | 3 | 2 | 1 |
| 4. The extent to which my positive expectations were met was | 5 | 4 | 3 | 2 | 1 |

What did you like about this program? _____

5. How effective was the presenter? _____

6. Do you have any comments or recommendations about how this program might be improved?

Evaluator's Position _____

Evaluator's Signature: _____ Company _____
(Optional)

Please fax evaluation to 469-546-3765