Participation Evaluation Tool [add your logo here]

**(EXAMPLE ONLY)**

**The aim of this questionnaire is to obtain valuable feedback from attendees about all aspects of the educational activity. This will provide valuable feedback to those creating the educational activity enabling for future enhancements. You do not have to enter your name and can leave the feedback author anonymous.**

|  |  |
| --- | --- |
| **Activity Title:** | Enter activity title |
| **Date held:** | Select date |
| **Location:** | Enter duration of hours |

**Part A: Program Evaluation**

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| --- |
| **List learning outcomes** |
|  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Please rate the following aspects of this presentation:** | **Strongly Disagree** | **Disagree** | **Agree** | **Strongly Agree** |
| The stated learning outcomes for this activity have been met? | 1 | 2 | 2 | 4 |
| The activity provided opportunities to seek clarification or feedback | 1 | 2 | 3 | 4 |
| The activity provided an opportunity for interaction | 1 | 2 | 3 | 4 |
| The facilitator provided a satisfactory environment for learning | 1 | 2 | 3 | 4 |
| The activity provided useful learning materials (including worksheets and handouts) | 1 | 2 | 3 | 4 |

|  |  |  |
| --- | --- | --- |
|  | **Questions** | **Answer** |
| **Q1** | **What is the most useful aspect of this activity?** |  |
| **Q2** | **What aspect(s) of this activity could be improved?** |  |
| **Q3** | **Would you recommend this activity to others?**  | ☐ Yes ☐ No*Add additional comments* |

**Part B: Evaluation of educational experience**

|  |  |  |
| --- | --- | --- |
|  | **Questions** | **Answer** |
| **Q4** | **What did you hope to learn through attendance at this activity?** |  |
| **Q5** | **Please rate to what degree your learning needs were met at this activity:** | **☐ Not met ☐ Partially met ☐ Entirely met***Add additional comments (optional)* |
| **Q6** | **How will this new learning contribute to your day-today practice?** |  |
| **Q7.** | **Would you consider further education in this area?** |  |
| **Q8.** | **Are there any other comments you would like to add?** |  |