

Workshop Feedback Form¹

Name (optional) _____

Institution/Department (optional) _____

Email (optional) _____

Quantitative Evaluation (scale 1 to 10, 10 being positive)

How valuable was the workshop? _____

To what degree were your goals and expectations met? _____

How much did you learn about assessment processes? _____

Effectiveness of the facilitators _____

Effectiveness of the workshop materials _____

Level of interest in attending additional related workshops _____

Please identify at least one strength from the workshop. (What actions taken today helped you the most and why?)

Please suggest at least one improvement which could make the workshop better. (What concerns/issues did you have today or moving forward and how can this be addressed?)

Please comment on any insights that resulted from the workshop and their significance.

Please list any special requests for material or follow-up.

1. Adapted from "Workshop Assessment Form", Pacific Crest, 2005.
Dr. Tristan Utschig (CETL) and Dr. Jonathan Gordon (OOA), Georgia Tech
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