

CASA Training Evaluation Form

Workshop Title: _____ Date: _____ Time: _____

Presenter (name and credentials): _____ Training Hours Earned: _____

Rule 48 eligible? Yes No Workshop format: _____

1. How would you rate your level of knowledge regarding this subject **BEFORE** attending the workshop?

Low 1 2 3 4 5 High

2. How would you rate your level of knowledge regarding this subject **AFTER** attending the workshop?

Low 1 2 3 4 5 High

3. What information were you hoping to learn from this workshop?

(space limited to visible area)

4. Name one thing you learned in this workshop that you will find useful in your CASA work.

(space limited to visible area)

5. Feedback/comments about the presenter.

(space limited to visible area)

6. How would you rate the workshop overall?

Low 1 2 3 4 5 High

Other training topic suggestions: _____

Your Name (please use CASA name): _____

CASA will automatically record these training hours upon return of this completed form. Thank you!

For Office use only:

Trng hrs logged

OR, if you have Internet email, send to: casafoms@co.lucas.oh.us