



PROGRAM EVALUATION FORM

1. What I liked *most* about this program were:

2. What I liked *least* about this program were:

3. Two things that would improve this program would include:

a. _____

b. _____

4. On a scale of 1 to 10 (1=poor; 10=excellent), how would you rate the program?

Poor Fair Good Very Good Excellent
1 2 3 4 5 6 7 8 9 10 *Best ever*

5. Additional comments (use the back, if necessary):

6. Would you like additional related materials emailed to you, (e.g. an article or checklist)?

Yes No

If yes, your email address is: _____

Your Name, Firm, and Title (optional, but appreciated): _____

May we quote you? Yes No

Thank you for taking the time to respond.