

Evaluation Form 1

Project:

Date.....

Please tick the boxes that mostly closely match your opinions.

- 1 =Poor
- 2 =Fair
- 3 =Good
- 4 =Very good
- 5 = Excellent

Description	OVERALL opinions				
	5	4	3	2	1
<u>Before</u> attending the project					
1. I know all about					
2. I realise the importance of					
<u>After</u> attending the project					
3. I know all about					
4. I realise the importance of					
5. I can apply the knowledge to my current study situation and future prospects.					
6. I understand what					
7. The appropriateness and meaningfulness of content.					
8. The delivery of content throughout the project as appropriate.					
9. The suitability of guest speaker.					
	YES			NO	
10. NUIC should have this project again next year.					

Comments:.....

Please submit this form to