Program Evaluation Provider InfoSpec, Inc.



We want to make our training sessions as meaningful as possible and appreciate your candid evaluation of your experience in response to the questions below. **Please complete and drop off before you leave**, **or send to the course provider**: Carol Davis -- InfoSpec, Inc. -- 2611 N. Loop 1604 West, Suite 100 San Antonio, TX 78258 -- 210-408-6700 -- education@infospecinc.com

COURSE TITLE: Locker Solutions for Every Place and Purpose				
SPONSOR: Scranton Products				
AIA COURSE NUMBER: ISP10E				
DATE: PRESENTER (required): _				
PLEASE INDICATE YOUR ROLE: O Architect O Engineer O Specification Writer O Interior Desig	ner O			
CIRCLE ONE NUMBER PER QUESTION:				
Overall satisfaction with this session:	Poor	2	3	Excellent
 Presenter strictly presented a non-proprietary course: If not Excellent, please comment below. 	1	2	3	4
3. Met overall personal objectives for attending:	1	2	3	4
4. Overall quality of training aids (handouts, audio/visual, etc.):	1	2	3	4
5. Quality of session content:	1	2	3	4
6. Overall knowledge and presentation of speaker(s):	1	2	3	4
7. Applicability/value of new knowledge, ideas, or information:	1	2	3	4
How could this session be improved?				
What other topics would be of interest?				
Additional Comments:				