LOWNDES COUNTY PUBLIC SCHOOLS
Evaluation Form

LOCATION ____________________ PRESENTER (s) ______________________________

WORKSHOP TITLE: ______________________________________________________________

DATE: ______________________

Place a check in the appropriate box indicating your position with the Lowndes County Public School System.

- Teacher (Circle One) Elementary  Middle  High  Principal/Assistant Principal
- Counselor  Supervisor/Education Specialist
- Librarian  District Administrator
- Instructional Aide  Other _______________________

Using the following scale, indicate your level of agreement with the following statements:

<table>
<thead>
<tr>
<th>Statement</th>
<th>1 = Strongly Disagree</th>
<th>2 = Disagree</th>
<th>3 = Neither Agree nor Disagree</th>
<th>4 = Agree</th>
<th>5 = Strongly Agree</th>
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</thead>
<tbody>
<tr>
<td>1. The content of this workshop/program met my expectations.</td>
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<td>2. The workshop/program objectives were met</td>
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<td>3. The method of instruction was appropriate for the objectives of the workshop/program.</td>
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<td>4. The presentation was clear, understandable, and well-organized.</td>
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<td>5. The length of time for this workshop/program was appropriate.</td>
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<td>6. I will use/apply the information from this workshop/program.</td>
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<td>7. This workshop/program will help me to be more effective.</td>
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<td>8. The size of the group(s) provided adequate experience for participants.</td>
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<td>9. I am prepared to apply what I learned in this workshop.</td>
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</table>

1. How will you use what you learned during this professional development activity?
   - I will share the information with one or more groups from the school community (e.g. students, parents, teachers, administrators).
   - I will implement the information in the classroom (e.g. lesson planning, teaching delivery, student learning).
   - I will use the information to improve my professional performance.
   - I will not use the information.
   - Other ____________________________________________________________

2. Most valuable to me was:
   - The strategies presented
   - Gaining a better understanding of the topic
   - Presenter/Presentation
   - All of the information
   - Other ____________________________________________________________

3. Least valuable to me was:
   - All of the information was valuable
   - Other ____________________________________________________________

4. One thing that might have made the professional development activity better
   - More hands-on activities
   - More time/Less time (Circle One)
   - Workshop made available on different day or time
   - I was satisfied with the professional development activity.
   - Other ____________________________________________________________

On a scale of 1-10 (with 10 being the highest) please rate the workshop

Revised July 2017