



## WORKSHOP EVALUATION

UPD WORKSHOP TOPIC: \_\_\_\_\_

DATE OF WORKSHOP: \_\_\_\_\_ LECTURER: \_\_\_\_\_

### 1. Please circle YES or NO to the following questions:

QUESTION	ANSWER		COMMENTS
a) Did you find the workshop worthwhile?	YES	NO:	_____
b) Did the workshop meet your needs?	YES	NO:	_____
c) Did you find the workshop too extensive for the time allocated?	YES	NO:	_____
d) Were the lecture sessions too long?	YES	NO:	_____
e) Was the information too technical?	YES	NO:	_____
f) Did you find the lecturer/s satisfactory?	YES	NO:	_____
g) Did you find the time of year suitable for your workshop?	YES	NO:	_____

### 2. Which aspects of the workshop have you found most useful?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### 3. Which aspects of the workshop did you find least useful?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### 4. What comments or suggestions would you make to improve the workshop?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Thank-you for your comments, your feedback is appreciated!*  
*PLEASE RETURN TO WORKSHOP LECTURER OR STATE ASSOCIATION*