

## Information Services Workshops and Seminars Evaluation Form

Name of Session \_\_\_\_\_ Date \_\_\_\_\_ I.S. Instructor \_\_\_\_\_

Name (optional) \_\_\_\_\_ Your Department \_\_\_\_\_

Circle your affiliation: Faculty Staff Graduate Student Undergraduate Other \_\_\_\_\_

Place taught: Computer Lab \_\_\_\_\_ Valley Lib \_\_\_\_\_ Other \_\_\_\_\_

<b>Overall Evaluation</b>		No basis for opinion	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
1. Objectives for the workshop were clearly explained.		0	1	2	3	4	5
2. I have learned new ideas and/or skills.		0	1	2	3	4	5
3. There was adequate time for hands-on practice (if appropriate).		0	1	2	3	4	5
4. I would recommend this workshop to others.		0	1	2	3	4	5
5. Overall, I was favorably impressed by this presentation.		0	1	2	3	4	5
Material covered was:	Too elementary _____		About right _____			Too complex _____	
Amount of information was:	Too little _____		About right _____			Too much _____	
The level of instruction was:	Too elementary _____		About right _____			Too complex _____	

<b>The Instructor:</b>	No basis for opinion	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
1. Was well prepared and organized.	0	1	2	3	4	5
2. Explained the material clearly.	0	1	2	3	4	5
3. Was sensitive to participants' ability to understand the material.	0	1	2	3	4	5
4. Stimulated interest in the subject matter.	0	1	2	3	4	5
5. Encouraged and responded to questions.	0	1	2	3	4	5
6. Seemed interested in teaching the workshop.	0	1	2	3	4	5
7. Was knowledgeable about the subject matter.	0	1	2	3	4	5
8. Identified resources for further help.	0	1	2	3	4	5
9. Treated participants with respect.	0	1	2	3	4	5

<b>Facilities &amp; Equipment</b>	No basis for opinion	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
1. The arrangement of the room/lab was adequate.	0	1	2	3	4	5
2. I could see the instructor clearly.	0	1	2	3	4	5
3. I could hear the instructor clearly.	0	1	2	3	4	5
4. I could see visual aids clearly (computer projections, transparencies, slides, video, etc.)	0	1	2	3	4	5
5. The lighting was adequate.	0	1	2	3	4	5

Did the workshop meet your expectations? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, please explain:

What helped you the most?

What helped you the least?

What would improve this workshop?

Do you have suggestions for future workshops?

Information Services is implementing a program to improve the quality of our instruction. Your feedback will be used for developmental and improvement purposes. Thank you for taking the time to complete this questionnaire.

**Please return completed forms to instructor**