

Professional Development Reflection Sheet

TOPIC: _____

PRESENTER: _____

WORKSHOP LOCATION: _____

DATE: _____

OVERALL PRESENTATION EVALUATION

Please circle the word that best reflects your opinion.

The content of this session was valuable and relevant.		
Agree	Disagree	Unsure
I would recommend this presentation to a colleague.		
Agree	Disagree	Unsure
Speaker (s) was (were) knowledgeable.		
Agree	Disagree	Unsure

Please circle the number that best reflects your opinion.

(5) Extremely satisfied (4) Very satisfied (3) Satisfied (2) Somewhat satisfied (1) Not satisfied

How satisfied were you with the speaker?	5 4 3 2 1
How satisfied were you with the content presented?	5 4 3 2 1
How satisfied were you with the organization of the content?	5 4 3 2 1
How satisfied were you with the level of engagement/activities?	5 4 3 2 1
How satisfied were you with the handouts provided?	5 4 3 2 1

Please share something(s) new that you learned from today's session:

Please share something(s) that you already do that were affirmed:

How was this program beneficial to your particular needs?