



Participant Evaluation
FFIEC Course Name
Month, Date, Year

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Agency _____ Name (optional) _____

Examination Experience: _____ years Specialty Examination Experience: _____ years

Please describe your learning objectives, expectations, and/or purpose for attending this conference.

Please use the scale below to rate the content of the conference and the delivery of the instructor.

Excellent 1	Above average 2	Average 3	Below average 4	Poor 5
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	Content	Delivery
<i>Topic Name</i>	_____	_____
Presenter/Instructor Name	_____	_____
Comments:		

(Additional topics and names will be added based on the course.)

Overall Course Rating (Please use scale above) _____

Comments:

SAMPLE

Please answer the questions below and provide additional information to support your rating.

How relevant was the conference content to your learning objectives, expectations, and/or purpose?

Very relevant

Not Relevant

Circle one: 1 2 3 4 5

Comments:

To what extent was your knowledge and/or understanding enhanced as a result of attending this conference?

A lot

Not at all

Circle one: 1 2 3 4 5

Highlight topics or key elements that enhanced your knowledge:

How likely are you to recommend this conference to others?

Very Likely

Not Likely

Circle one: 1 2 3 4 5

Comments:

The following is a list of questions that may be used to supplement the evaluation ratings requested above.

Please answer the questions below.

- What additional topics or speakers would you suggest/recommend for future sessions?
- Which topics were especially informative and useful to enhancing your knowledge and job performance?
- Which modules/topics were the MOST beneficial? Why?
- Which topics were the LEAST beneficial? Why?
- What suggestions do you have for enhancing/improving the session?
- What suggestions do you have for making it more relevant to your job responsibilities?
- Did the pre-course assignment provide adequate preparation to enhance the learning experience? YES or NO
If NO, please provide an explanation.
- Was the pre-course assignment valuable in preparing you for the in-class portion of the session? YES or NO
If NO, please provide an explanation.
- What topics would you recommend for future sessions?
- What suggestions do you have for improving the session, including structure?
- **YOU CAN HELP!**
Identify areas of needed training or continuing education that is not currently offered at your agency or FFIEC.

Courses accredited for continuing professional education must also solicit the information below from participants. Please indicate your agreement with the following statements.

	<i>Agree</i>	<i>Disagree</i>	<i>Don't know</i>
<i>1. Stated learning objectives were met.</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<i>2. Stated prerequisite requirements were appropriate and sufficient.</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<i>3. Program materials were relevant and contributed to the achievement of the learning objectives.</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<i>4. Time allotted to the learning activity was appropriate.</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<i>5. Individual instructors were effective.</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>