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OBGYN FASD-SBI Event Evaluation

Speaker: _____ Event Date: _____

Event Title: _____

We're interested in your thoughts about this FASD training/ presentation.

<i>To what extent do you agree with the following statements? (Select ONE number/response for each.)</i>	<i>Strongly disagree</i>	<i>Disagree</i>	<i>Neutral</i>	<i>Agree</i>	<i>Strongly Agree</i>
The speaker was knowledgeable about the content.	1	2	3	4	5
The speaker explained concepts clearly.	1	2	3	4	5
The presentation was presented in culturally competent, sensitive manner.	1	2	3	4	5
The content related to the learning objectives.	1	2	3	4	5
The content was appropriate for the audience.	1	2	3	4	5
Visual aids, handouts, and other media clarified content.	1	2	3	4	5
This content will be useful to me professionally.	1	2	3	4	5
This training increased my awareness and knowledge of the harmful effects of alcohol on the developing fetus.	1	2	3	4	5
I would attend another presentation on the topic.	1	2	3	4	5
I would recommend this presentation to others.	1	2	3	4	5
Overall, the training met or exceeded my expectations.	1	2	3	4	5

1. What did you find most valuable/useful about the training?
2. How could this training be improved? (Was there information you would like that the training did not include? Is there a better way to present this information?)

Thanks for your participation and feedback!