

## Evaluation for Knowledge-based Parent and Family Extension Programs NC CES

Session Title: \_\_\_\_\_ Date: \_\_\_\_\_

Parent's name or code \_\_\_\_\_

Educator (s): \_\_\_\_\_

Evaluation area addressed: (understanding child development, motivating and guiding children, nurturing children, advocating for children, etc.) \_\_\_\_\_

Thank-you for taking time to complete this brief evaluation. Please rate the training session.

	<b>Strongly Agree</b>	<b>Agree</b>	<b>Neutral</b>	<b>Disagree</b>	<b>Strongly Disagree</b>
1. The objectives of this session were clear to me.					
2. The learning session covered all the learning objectives outlined.					
3. The new ideas presented will be helpful to me at home.					
4. The content was well organized					
5. The information presented was current.					
6. The visuals and handouts were appropriate and helpful.					
7. The training provided me with new knowledge					
8. The training provided me with new skills.					
9. Enough time was available to cover the subject matter.					

I would like future educational sessions from this presenter \_\_\_yes \_\_\_ no

I would like to see a follow-up from this session. \_\_\_yes \_\_\_ no

I am interested in training on these topics:

Comments/Suggestions: