



## Education Programme Evaluation

Please help us to improve our education programme by taking a few minutes to answer a few questions about your experience today. We value your feedback and will incorporate your thoughts, comments and suggestions into future presentations.

Please give a rating to each of the following questions:

|  | Strongly agree | Agree | Disagree | Strongly disagree |
|--|----------------|-------|----------|-------------------|
| Overall I was satisfied with the session               |                |       |          |                   |
| I would recommend this session to a co-worker          |                |       |          |                   |
| The session was helpful                                |                |       |          |                   |
| The presentation was easy to understand and follow     |                |       |          |                   |
| The session will help me in my job (if appropriate)    |                |       |          |                   |
| Length of session was about right                      |                |       |          |                   |
| Materials provided were relevant                       |                |       |          |                   |
| Content was well organised                             |                |       |          |                   |
| Questions were encouraged                              |                |       |          |                   |
| The presenter was effective                            |                |       |          |                   |
| I am confident I know where to go for more information |                |       |          |                   |

Any other comments:

Name of presenter

Date

Your name (optional)

Your e-mail

Your organisation

We greatly appreciate your support and would like to keep in contact with you about our news, fundraising activities, volunteering and appeals. Please select all the ways you would like to be contacted below:

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