

ARMA International Education Evaluation

Title: _____ Session Number: _____

Facilitator(s) Name(s): _____ Date: _____

Thank you for participating in this training program. Please complete the following evaluation by commenting where noted and marking the appropriate box to indicate your level of satisfaction. Your feedback will help us assure high quality educational programming.

QUESTION	Strongly Agree	Agree	Undecided	Disagree	Strongly Disagree
REVIEW OF FACILITATOR					
The facilitator appeared to be well-practiced, prepared, and confident.					
The facilitator taught at a pace suitable for the participants.					
The facilitator was knowledgeable in the subject area.					
The facilitator left room for questions and answered each thoroughly.					
The facilitator provided practical, useful, real-world examples.					
The facilitator involved participants in activities & discussions.					
The facilitator inappropriately promoted his/her products/services.					
The facilitator's overall performance was effective and helped me learn.					
REVIEW OF EDUCATION					
I was very interested in the education topic.					
The description in the program guide accurately described the education.					
The education content met my expectations.					
The education content met my needs.					
The education topic was timely and relevant.					
I clearly understood the learning objectives.					
The education met all of its stated objectives.					
I had enough time to learn the subject matter taught.					
The training provided tools, "how-to"s and/or solutions that will be useful in my career.					
Overall, I was satisfied with this education program.					
REVIEW OF LEARNING RESOURCES					
The facilities and equipment were favorable to learning.					
The learning materials (e.g. handout materials) were helpful during the training.					
The learning materials (e.g. handout materials) will be a helpful reference following the training.					
The presentation slides were easy to read.					
The presentation slides were a valuable teaching tool.					
The ability to access or download the presentation slides from the web following the training will be helpful.					
REVIEW OF YOUR LEARNING					
My knowledge and/or skills increased as a result of this training.					
The knowledge and/or skills gained through this training are directly applicable to my job.					
I am likely to use some or all of the skills taught in this training on the job.					

Would you attend another session presented by this instructor?

YES

NO

What improvements would make this program more effective? _____

What aspects of this session contributed most to your learning? _____

What aspects of this session detracted from your learning? _____

What other topics would you like to see offered by ARMA? _____

Additional Comments: _____
