



## Parent Workshop Evaluation

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Name of Workshop: \_\_\_\_\_

Date: \_\_\_\_\_

1. Why did you attend today's workshop? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

2. Did the information you learned today help you in making a decision about your child's education? *(Please Circle One)*    **Yes**                      **No**

3. What topics would you like to learn more about at a future workshop?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Do you have any suggestions for this workshop? Would you change anything?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Would you recommend other parents to attend a similar event?  
**(Please Circle One)**        **Yes**                      **No**