CASA of Central Virginia
Independent In-Service Training Evaluation Form

This form will be utilized to log independent volunteer in-service training opportunities. Please assist us by offering feedback on the training materials you reviewed or the community training session you attended.

Volunteer's Name: _____

Advocate Manager: _____

Training Title: _____

Presenter: _____

Location and Format: _____

Date and Time Spent: _____

Miles Traveled, if applicable: _____

1. How did you hear about the training?

2. What did you like best about the training?

3. What is the most important idea you heard in the training?

4. How did the training relate to your work as a CASA Volunteer?

5. What did you learn in the training that will affect your CASA volunteer advocacy?

6. What other topics would you like to learn more about?