Workshop Feedback Form PDF

Workshop Information
Workshop Name:
• Date:
• Location:
Participant Details
• Name:
Email Address:
Job Title:
Feedback
Content Evaluation
1. Rate the overall content quality:
Excellent [] Good [] Fair [] Poor []
2. Was the material covered relevant?
o Yes [] No []
3. Rate the effectiveness of the presenter:
Excellent [] Good [] Fair [] Poor []

Experience

1. Rate the workshop's interactivity:

Excellent [] Good [] Fair [] Poor []
2. Was the event well-coordinated?
o Yes [] No []
3. Rate the workshop location and amenities:
o Excellent [] Good [] Fair [] Poor []
Comments and Suggestions
Favorite aspect of the workshop:
0
Areas for improvement:
0
Additional feedback:
0
Acknowledgment
Participant Signature:
• Date: