Workshop Feedback Form Template Word

Workshop	Information
TTO INSTITUTE	miorination

Workshop Title:	
• Date:	
Location:	
Participant Information	
• Name:	
• Email:	
Position:	
Feedback	
Content and Delivery	
1. How would you rate the content of the workshop?	
Excellent [] Good [] Fair [] Poor []	
2. Was the workshop content relevant to your needs?	
○ Yes [] No []	
3. How would you rate the presenter's delivery?	
Excellent [] Good [] Fair [] Poor []	

Logistics

1. How would you rate the venue and facilities?

4. Was the workshop engaging and interactive?

- Excellent [] Good [] Fair [] Poor []
- 2. Was the workshop well-organized?

o Yes [] No []

Additional Comments
What did you like most about the workshop?
What improvements would you suggest?
0
Any other comments or suggestions?
0
Signature
• Signature:

o Yes [] No []