Workshop Feedback Form for Students

Workshop Information

•	Workshop Title:
•	Date:
•	Location:
Stud	ent Information
•	Name:
•	Email:
•	Course/Year:

Feedback

Content and Instruction

- 1. Rate the quality of the workshop content:
 - Excellent [] Good [] Fair [] Poor []
- 2. Was the content relevant to your studies?
 - o Yes [] No []
- 3. Rate the instructor's effectiveness:
 - Excellent [] Good [] Fair [] Poor []

Workshop Experience

- 1. How interactive was the workshop?
 - Very Interactive [] Interactive [] Not Interactive []
- 2. Was the workshop well-structured?
 - o Yes [] No []
- 3. Rate the suitability of the venue:

0	Excellent [] Good [] Fair [] Poor []
Additional F	eedback
• What	did you enjoy the most?
• What	could be improved?
Any o	ther comments?
0	
Signature	
• Signa	ture:
• Date:	