



Delta State
University

Graduate and Continuing Studies
"The Delta's Link to Lifelong Learning"

PROFESSIONAL DEVELOPMENT EVALUATION

Seminar Title _____ Date(s) _____

Instructor(s) _____ Location _____

	5	4	3	2	1
	Excellence	Very Good	Good	Fair	Poor

1. Overall professional development

Ultimate value of information	_____	_____	_____	_____	_____
Organization & flow of material	_____	_____	_____	_____	_____
Value of exercise and/or participation	_____	_____	_____	_____	_____

2. Overall trainer rating

Answer questions appropriately	_____	_____	_____	_____	_____
Demonstrated mastery of subject matter	_____	_____	_____	_____	_____
Projected enthusiasm & a positive image	_____	_____	_____	_____	_____

3. What specific information was of greatest value to you?

4. What specific instructional strategies do you suggest for improvement?

5. How do you feel about the amount of participation?
 _____ Wanted more _____ Wanted less _____ Just Right

6. Specifically, how will this training benefit you when you return to the classroom or school?

7. Please use the space below to share any other comments or reactions about the training.

8. What future training or follow-up activities do you need to support the concepts you learned in this seminar?