



## Continuing Professional Development Activity Evaluation Form

<b>Course Name:</b>	<b>Date:</b>	<b>Rating:...../25</b>	<b>%=</b>
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This course met my expected learning objectives:	Yes <input type="checkbox"/> No <input type="checkbox"/>
This course contributed to the enhancement of my competencies	Yes <input type="checkbox"/> No <input type="checkbox"/>
There was sufficient time allowed for audience participation?	Yes <input type="checkbox"/> No <input type="checkbox"/>
I would recommend this lecture as a CPD topic	Yes <input type="checkbox"/> No <input type="checkbox"/>
Did you find the course to be free of commercial bias?	Yes <input type="checkbox"/> No <input type="checkbox"/>

**Evaluation: Please rate by circling the appropriate number**

	1 = Poor	2 = Fair	3 = Good	4 = Very Good	5 = Excellent
	<b>Content of Presentation</b>		<b>Presentation Skills</b>		<b>IT Aids of Presentation</b>
<b>Speaker</b>	1 2 3 4 5		1 2 3 4 5		1 2 3 4 5
<b>Facilities</b>	1 2 3 4 5				

**Please comment on topics you would like to see addressed at future CPD activities:**

**1. Any remarks and Recommendations:**

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