**OVERALL EVALUATION OF THE SEMINAR/TRAINING-WORKSHOP**

**TITLE OF THE SEMINAR:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NAME OF THE SPEAKER:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DATE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**VENUE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

We appreciate your help in evaluating this seminar. On a scale of 1 to 5, where **5 = strongly agree**, **4 = agree**, **3 = neutral**, **2 = disagree**, and **1 = strongly disagree**, please indicate your rating of the presentation by encircling the appropriate number.

|  |  |
| --- | --- |
| **SPEAKER/S (GENERALLY)** | **RATE** |
| 1. Knowledgeable in content areas | 5 4 3 2 1 |
| 2. Content consistent with objectives | 5 4 3 2 1 |
| 3. Clarified content in response to questions | 5 4 3 2 1 |
| **CONTENT** |  |
| 1. Appropriate for intended audience | 5 4 3 2 1 |
| 2. Consistent with stated objectives | 5 4 3 2 1 |
| **PRESENTATION STRATEGIES** |  |
| 1. Visual aids and oral presentations clarified content | 5 4 3 2 1 |
| 2. Presentation methods and strategies were appropriate for seminar proper | 5 4 3 2 1 |
| **RELEVANCE** |  |
| 1. Information could be applied to practice | 5 4 3 2 1 |
| 2. Information could contribute to achieving personal, professional goals | 5 4 3 2 1 |
| **VENUE** |  |
| 1. Was adequate and proper for the seminar i.e. the venue is conducive to the participants | 5 4 3 2 1 |
| **OVERALL IMPACT** |  |
| 1. This program enhanced my professional expertise | 5 4 3 2 1 |
| 2. I would endorse this program to others. | 5 4 3 2 1 |

Comments/Program Improvements

Participant’s Name (OPTIONAL)

|  |  |  |  |
| --- | --- | --- | --- |
| Form No. TSU-GAD-SF-02 | Revision No.: 02 | Effectivity Date: October 25, 2024 | Page **1** of **1** |

** Tarlac State University**

**GENDER AND DEVELOPMENT OFFICE**

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