# Professional Development Evaluation Form

## Marking Instructions
- Use a No. 2 pencil or a blue or black ink pen only.
- Do not use pens with ink that seals through the paper.
- Make solid marks that fill the circle completely.
- Make no stray marks on this form.

### Correct: ☐  □  □  □
### Incorrect: ☑  ✗  ✗  ✗

## Course Content
1. The overall course quality was: ................................... 1 2 3 4 5
2. Effective use of learning assessments (quizzes, games, or other activities) to provide feedback on stated learning objectives: ................................... 1 2 3 4 5
3. Presentation time was sufficient to cover all topics: ............. 1 2 3 4 5
4. Currency/timeliness of concepts and information presented: ... 1 2 3 4 5
5. Extent to which the course has equipped you with the knowledge or skills that you can apply on the job: ......................... 1 2 3 4 5
6. Extent to which stated learning objectives were met: ............ 1 2 3 4 5
7. If learning objectives were not met, please comment:

## Instructor Skills

### Instructor 1
(Name)

<table>
<thead>
<tr>
<th></th>
<th>Poor</th>
<th>Fair</th>
<th>Average</th>
<th>Good</th>
<th>Excellent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Overall instructor quality:</td>
<td>1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Preparation/organization:</td>
<td>1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Knowledge of subject matter:</td>
<td>1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Encourages student participation:</td>
<td>1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Teaching technique/style:</td>
<td>1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Ability to communicate terms &amp; concepts:</td>
<td>1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Answers questions clearly:</td>
<td>1 2 3 4 5</td>
<td></td>
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</tr>
<tr>
<td>8. Please provide comments about the instructor for this course.</td>
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### Instructor 2
(Name)

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<td>8. Please provide comments about the instructor for this course.</td>
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## Learning Materials

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</tr>
</thead>
<tbody>
<tr>
<td>1. Quality of slides, videos, and other presentation aids:</td>
<td>1</td>
<td></td>
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<tr>
<td>2. Quality of the course manual:</td>
<td>1</td>
<td></td>
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</tr>
<tr>
<td>3. Please provide any additional comments you have on this course such as applicability to your job, learning materials, learning environment (classroom, furniture, lighting, room temperature, A/V equipment), food/beverage, etc.</td>
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Customer Information

1. To what age group do you belong?
   - 21-30
   - 31-40
   - 41-50
   - 51-60
   - 61+

2. Identify the top two (2) factors that influenced you to take this course:
   - Subject or topic
   - Instructor reputation
   - Required by mg
   - Networking potential
   - Location

3. How did you learn about this course? (mark all that apply)
   - Brochure
   - Email announcement
   - Electronic newsletter
   - Previous Seminar Attendee
   - Co-worker
   - Supervisor
   - SAE Website
   - SAE Product Catalog

4. What other courses or learning opportunities should SAE offer?

5. Fill in oval if you would like to provide a short quotation of your overall impression of this course for possible inclusion in a future brochure.

   Providing this information including your signature grants SAE permission to print it.

   Comments:

   Name: ____________________________

   Position/Title: ____________________________

   Company: ____________________________

   Signature: ____________________________

6. What is your preferred method for obtaining information about SAE courses?
   - Email announcement
   - Brochure
   - Web search
   - SAE Product Catalog
   - Supervisor
   - Word of mouth

   Other:

   ____________________________

7. Please mark any of the following ovals and contact information if you or someone you know would be interested in:
   - Someone from SAE contacting you with information on delivering this course (or any other course topic) onsite at your company.
   - Becoming an SAE instructor.
   - Online courses in this subject area.

   We would appreciate your contact information to follow up with you on any of your comments. (Optional)

   Name ____________________________

   Job Title ____________________________

   Company ____________________________

   Email ____________________________