

Online Workshop Participant Evaluation Survey

Name (optional):

Workshop Title:

Workshop Date:

1. How satisfied were you with the workshop overall?

Very satisfied Satisfied Neutral Dissatisfied Very dissatisfied

2. How would you rate the following aspects?

	Excellent	Good	Fair	Poor
Content quality	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Presenter's delivery	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Usefulness of materials/resources	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Opportunities for interaction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3. Was the online platform easy to use?

4. What was the most valuable thing you learned?

5. How can we improve future workshops?

6. Would you recommend this workshop to others?

Yes No