

Selma City Schools

Professional Development Evaluation Form

Teacher: _____

School: _____

Name of Workshop: _____

Date of Workshop: _____

Total Hour of Workshops _____

Funds Used: _____

Session Title: _____

Presenter: _____

Please Circle Your Rating

	N/A	Poor	Fair	Good	Excellent
1. The session was well organized.	1	2	3	4	5
2. The presenter was well prepared.	1	2	3	4	5
3. The topic was well presented.	1	2	3	4	5
4. Activities and materials were useful and appropriate.	1	2	3	4	5
5. The session was informative.	1	2	3	4	5
6. The handouts were beneficial.	1	2	3	4	5
7. Enough time was allotted for discussion and questions.	1	2	3	4	5
8. The presenter was knowledgeable and well informed on the topic.	1	2	3	4	5
9. I would recommend this session.	1	2	3	4	5
10. This session has contributed to my professional growth.	1	2	3	4	5

The part of the in-service most valuable to me was: (EXPLAIN)

The part of the in-service least valuable to me was: (EXPLAIN)

Additional Comments:
