



MEDFORD PUBLIC SCHOOLS
PROFESSIONAL DEVELOPMENT PROGRAM

EVALUATION

Workshop Title _____ Date _____

Instructor _____

Please rate the following statements on a scale of 1 to 5 with 1 being the lowest and 5 being the highest.

1. I feel the objectives of the workshop were met. _____
2. The presenter(s) of the workshop was (were) well prepared. _____
3. The presenter allowed enough time for questions and answers. _____
4. I feel this program can be incorporated into my curriculum. _____
5. If feel that this program balanced theory and practice. _____

Please respond to the statements below:

1. The major strengths of the workshop were:

2. The workshop could have been improved by:

Please use back for additional comments.

Please return to Diane Caldwell at Medford High School