

Workshop Evaluation

Please take time to answer the following questions—your feedback is truly appreciated!

Your program/ministry/job function: _____ Your role/title: _____

Facilitator's Name: _____

Please rate the following:	Poor		Average		Excellent
Your facilitator	1	2	3	4	5
<i>A Time to Protect God's Children</i>	1	2	3	4	5
<i>A Plan to Protect God's Children</i>	1	2	3	4	5
Length of the workshop	1	2	3	4	5
Information gained from the workshop	1	2	3	4	5
Group discussion	1	2	3	4	5
Facility/setting	1	2	3	4	5
Overall	1	2	3	4	5

The most useful part of this workshop was _____

The least useful part of this workshop was _____

Comments regarding the facilitator _____

How much does the information from this workshop apply to your program or ministry?

Other comments or suggestions? _____
