**Positive Youth Development Program Team
March 18-20, 2019**

**Evaluation Form**

*Thank you for taking the time to complete this evaluation form. Your feedback will help us improve future events.*

**RATED Questions**

**1=Extremely Unsatisfied, 2=Unsatisfied, 3=Neutral, 4=Satisfied 5=Extremely Satisfied**

|  |  |
| --- | --- |
|  | **Please circle one** |
| **Overall, how would you rate the meeting?** |  **1 2 3 4 5** |
| **The presentations were informative and comprehensive.\*** |  **1 2 3 4 5** |
| **The level of detail was about right.** |  **1 2 3 4 5** |
| **The amount of time for each topic was about right.** |  **1 2 3 4 5** |
| **How would you rate the registration process?** |  **1 2 3 4 5** |
| **How would you rate the meals at this event?** |  **1 2 3 4 5** |

**fREE rESPONSE QUESTIONS**

**\*Please highlight any of the presentations you liked and/or disliked. Please explain.**

**What did you like and dislike about the meeting?**

**What one or two things do you think you will use back in your county(ies)?**

**What topics were missing?**

**What can be improved for future meetings?**

**Anything else you would like to add?**

Please return completed forms to anrprogramsupport@ucanr.edu