

Paragould School District Workshop Evaluation

Presenter:		Date:	
Name of the workshop:			
Circle the statement which best describes your opinion about this workshop.			
Not much new and different or useful	Has potential, somewhat interesting and useful	Fulfilled goals, many new and useful ideas	A great learning experience
Please comment on the workshop.			
Most useful parts and why:			
Least useful parts and w	hy:		
Suggestions for improvements:			
Additional comments:			