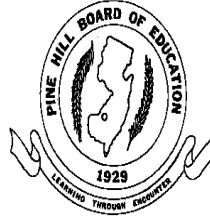


Professional Development Evaluation Form

Pine Hill Public Schools

Workshops Related to your Building Goals and Objectives



Your name

Date of Workshop

Workshop Title

Your Position or Title

School

Please rate the following on a scale of 1-4

(1=strongly agree, 2=agree, 3=disagree, 4=strongly disagree)

1. The workshop topic was useful.

1

2

3

4

2. The handouts were valuable.

1

2

3

4

3. The presenter accomplished the objectives of the workshop.

1

2

3

4

4. I had the prerequisite skills needed to benefit from this workshop.

1

2

3

4

5. I will be able to use this information presented to benefit children/job skills.

1

2

3

4

Briefly explain (use the back if necessary) how the information from this workshop will be incorporated into your lessons to improve learning and how/when you will turnkey the information to your colleagues. Please return a copy of this form to your building principal.