

# Professional Development Activity Reflections Form

**Directions:** Please take a few minutes to fill out this questionnaire so that we may assess the value, strengths and weaknesses of our professional development workshops. This information will enable us to better provide for your professional needs in future programs.

**Title of Workshop:** \_\_\_\_\_

**Name of Instructor:** \_\_\_\_\_

**Date of Workshop:** \_\_\_\_\_

Please circle the response that best represents how you feel about the program.

5 = Strongly Agree      4 = Agree      3 = Undecided      2 = Disagree      1 = Strongly Disagree

- |     |   |   |   |   |   |   |
|-----|---|---|---|---|---|---|
| 1.  | The goals and objectives of each session were clear | 5 | 4 | 3 | 2 | 1 |
| 2.  | The instructor was well prepared and organized      | 5 | 4 | 3 | 2 | 1 |
| 3.  | The materials and handouts were useful              | 5 | 4 | 3 | 2 | 1 |
| 4.  | The information presented was informative           | 5 | 4 | 3 | 2 | 1 |
| 5.  | The workshop maintained my interest                 | 5 | 4 | 3 | 2 | 1 |
| 6.  | I was able to ask and get answers to my questions   | 5 | 4 | 3 | 2 | 1 |
| 7.  | I was able to interact occasionally with my peers   | 5 | 4 | 3 | 2 | 1 |
| 8.  | I learned some things that will help me in my role  | 5 | 4 | 3 | 2 | 1 |
| 9.  | The time allotted was appropriate to the sessions   | 5 | 4 | 3 | 2 | 1 |
| 10. | I would recommend this workshop to others           | 5 | 4 | 3 | 2 | 1 |

Over

1. List 3 things you have learned during the workshop.

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2. List 2 things you would like to know more about.

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3. Name 1 thing you are going to do as a result of this workshop.

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4. How would you rate the workshop overall?

Outstanding  
1

Commendable  
2

Adequate  
3

Needs Improvement  
4

Not Helpful  
5

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5. Would you be willing to share your expertise in a particular area sometime in the future?

\_\_\_\_\_Yes

\_\_\_\_\_No

*Please describe.....*

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**Additional Clarifying Comments:**

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Name: \_\_\_\_\_  
*(Optional, but helpful for follow up)*

Grade Level/Dept: \_\_\_\_\_  
*(This is very helpful information)*

**THANK YOU! WE VALUE YOUR COMMENTS AND SUGGESTIONS!**