

Optometric Syntonic Phototherapy Speaker 201 EVALUATION FORM

Location: Virtual

Date: February 28, 2021

For each of the following areas, please indicate your reaction:

Content	Excellent	Good	Needs Improvement	Not Applicable
Covered Useful Materials	[]	[]	[]	[]
Practical to My Needs and interest	[]	[]	[]	[]
Well Organized	[]	[]	[]	[]
Presented at the Right Level	[]	[]	[]	[]
Useful Visual Aids and Handouts	[]	[]	[]	[]

Presentation

Instructor's Knowledge	[]	[]	[]	[]
Instructor's Presentation Style	[]	[]	[]	[]
Instructor Covered Material Clearly	[]	[]	[]	[]
Instructor Responded Well to Questions	[]	[]	[]	[]

How could this format be improved?

Any other comments or suggestions?

Overall, how would you evaluate this virtual training session?

Excellent	Good	Fair	Poor
[]	[]	[]	[]