BUREAU OF HOME AND COMMUNITY SERVICES ALABAMA DEPARTMENT OF PUBLIC HEALTH

Program Evaluation Record

To help us meet your educational needs, we ask that you complete this evaluation form. Thank you for your attendance and cooperation.

PROGRAM TITLE: "HIV/AIDS Update 2008" May 7, 2008

NAME:	AGENCY/COUNTY:								
	FACULTY: Bridget Byrd and Richard Meriwether								
<u>LEGEND</u> : 5 - Outsta	tanding 4 - Above aver			3 - Average	2 - Below average		1 - Unacceptable		
		Circle the r	numbe	er you think be	est evaluates	s this ac	ctivity.		
This progran	n utiliz	ed knowledgea	ıble, o	rganized, and	effective sp	eakers:	:		
Bridget Byrd					5	4	3	2	1
Richa	ard Me	riwether			5	4	3	2	1
Obje	ctive 1				5	4	3	2	1
Obje	ctive 2				5	4	3	2	1
Obje	ctive 3				5	4	3	2	1
Obje	ctive 4				5	4	3	2	1
Obje	ctive 5				5	4	3	2	1
Provided content relative to the session objectives:					5	4	3	2	1
Effectively used teaching methods & learning aids:					5	4	3	2	1
Provided info	ormati	on pertinent to	my jo	b duties:	5	4	3	2	1
Enabled me to better perform my job duties:					5	4	3	2	1
What new kn	owled	ae did this in-s	ervice	provide?					

List areas you think need improvement.

What additional topics would you recommend for future programs?