Evaluation Form

Date: ______________________________

Educator: __________________________

Do you have any questions about the information presented today?
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

What was the most helpful information presented about how to prepare?
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

What was the least helpful information presented about how to prepare?
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Please describe your personal level of preparedness. How will the information presented today influence your preparedness plans?
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
How many days would you say you are prepared for now?

- None
- 1
- 2
- 3
- 4

- 5
- 6
- 7-10
- 10 or more

How many days will you prepare for after this training?

- No difference
- None
- 1
- 2
- 3

- 4
- 5
- 6
- 7-10
- 10 or more

Please share any suggestions or feedback for improving this training session. How can we make the training more effective?

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

What is your preferred method of receiving preparedness information? Please check all that apply.

- Group presentations
- One-on-one meetings
- Social Media
- Web Site

- Print materials
- Email
- Other: _____________________
Contact Information (Optional)

Organization: ________________________
Address: ____________________________
City/State/Zip: ______________________
Email: ______________________________