

INTERNATIONAL EROSION CONTROL ASSOCIATION

EVALUATION

Technical Session Title: _____

A. Technical Session Evaluation

- | | Excellent | Good | Average | Poor |
|------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 1. Quality of Subject Matter | | | | |
| a. Course Content | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Audio/Visuals | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Presentation overall | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
2. Did the technical session meet your expectations based on the course announcement and other publicity?
 Yes No
If no, why not? _____
3. What level would you rate this technical session?
 Basic Intermediate Advanced
What level would be most suitable for your needs?
 Basic Intermediate Advanced

B. Presenter Evaluation

Name of Primary Presenter: _____

- | | Excellent | Good | Average | Poor |
|---------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 1. Knowledge of Subject | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Organization of Lecture/Discussion | <input type="checkbox"/> | | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Clarity of Presentation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Pace of Presentation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Would you attend another course taught by this instructor? Yes No

Name of Secondary Presenter: _____

- | | Excellent | Good | Average | Poor |
|---------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 1. Knowledge of Subject | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Organization of Lecture/Discussion | <input type="checkbox"/> | | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Clarity of Presentation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Pace of Presentation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Would you attend another course taught by this instructor? Yes No

C. What other erosion and sediment control topics would you like to learn more about?

Testimonial – If you would like to, please provide a brief quote, which could be considered for use in our future course promotions. _____

Additional Comments _____

Name _____ Company: _____