**Workshop Evaluation Survey**

Workshop Topic:

Community:

Date:

We would like to know how you feel about today’s workshop so that we can improve our workshops and report back to our funder.

How would you rate your knowledge of the topic BEFORE the workshop?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1 |  | 2 |  | 3 |  | 4 |
| I KNOW NOTHING ABOUT THIS TOPIC |  | I KNOW A LITTLE ABOUT THIS TOPIC |  | I KNOW A LOT ABOUT THIS TOPIC |  | I KNOW ALMOST EVERYTHING ABOUT THIS TOPIC |

How would you rate your learning - newknowledge or skills - AFTER the workshops you attended?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1 |  | 2 |  | 3 |  | 4 |
| I KNOW NOTHING ABOUT THIS TOPIC |  | I KNOW A LITTLE ABOUT THIS TOPIC |  | I KNOW A LOT ABOUT THIS TOPIC |  | I KNOW ALMOST EVERYTHING ABOUT THIS TOPIC |

What did you learn?

What will you do differently at home or in your community?

**Comments**

What other thoughts or comments about the workshop do you have?