

NEW ADMINISTRATOR ORIENTATION *Workshop Evaluation*

Date: _____

Name of Presenter: _____

Your Position (√):
 _____ Dean
 _____ Department Head
 _____ Program Director
 _____ Assistant Department Head
 _____ Assistant Program Director
 _____ Other: _____

Please answer the following questions evaluating your experience as a participant in the New Administrator Orientation workshop, with a "2" indicating highly favorable and a "-2" highly unfavorable.

	2	1	0	-1	-2
1. The topics addressed are relevant to my new position.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. The workshop is a useful training experience.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. The format is well-designed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The amount of time allocated to topics is, on the whole, sufficient.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I feel better-prepared to function in my new position as a result of the workshop.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Answer the questions below in the space provided:

6. What topics could be deleted from the presentation?

7. What topics should be added to the presentation?

8. What topics require greater coverage?

9. What changes would you recommend for future workshops?

10. Please provide any additional comments about the experience: