



Mid-America Regional Interpreter Education Center

Distance Opportunities for Interpreter Training Center, UNC @ Lowry Campus, 1059 Alton Way, Denver, CO 80230
1-866-885-6087 or (303) 365-7685 Fax (303) 365-7677

WORKSHOP EVALUATION/DEMOGRAPHIC FORM

Workshop Title _____

Presenter(s) _____

Location _____ **Date** _____

*Please complete the following optional information as the federal government requires that we report these statistics. Thank you.

I am: Male _____ Female _____

I am: Deaf _____ Hard of Hearing _____ Hearing _____ Deaf/Blind _____
Interpreter _____ Student Interpreter _____ Parent of Deaf Child _____
Educator of Deaf/Hard of Hearing _____ Other (please explain) _____

If you are an interpreter, what is your primary work setting? (pick one)
K-12 _____ Post-Secondary _____ Mental Health _____ Medical _____ Legal _____ Other (specify) _____

Ethnicity: African American/Black _____ Caucasian _____ Asian American _____
Pacific Islander _____ Alaskan Native _____ American Indian _____
Hispanic/Latino American _____ Other _____

Please indicate your age range: 18-25 _____
26-40 _____
41-55 _____
55-65 _____
Over 65 _____

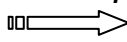
If you require accommodations under ADA or 504, were they satisfactorily provided? Yes _____ No _____
If no, please explain: _____

Circle the number that indicates your perspective on the following statements.
1 = strongly agree, 2 = agree, 3 = indifferent, 4 = disagree, 5 = strongly disagree, N/A = not applicable

	Agree		Disagree			
1. The workshop had clearly stated objectives.	1	2	3	4	5	N/A
2. The content of this workshop was described adequately in advance publicity.	1	2	3	4	5	N/A
3. The workshop provided strategies I can use in my work as an interpreter.	1	2	3	4	5	N/A
4. The presenter(s) communicated a clear understanding of topic content.	1	2	3	4	5	N/A
5. The instructional level of this workshop was consistent with my expectations.	1	2	3	4	5	N/A

Circle the number that indicates your perspective on the following statements.

1 = strongly agree, 2 = agree, 3 = indifferent, 4 = disagree, 5 = strongly disagree, N/A = not applicable

Agree  Disagree

- | | | | | | | |
|--|---|---|---|---|---|-----|
| 6. The organization of this workshop was effective and maximized learning. | 1 | 2 | 3 | 4 | 5 | N/A |
| 7. Instructional technology (e.g. audiovisual) and supplementary materials were assets to this workshop. | 1 | 2 | 3 | 4 | 5 | N/A |
| 8. The distance delivery technology (e.g. videoconference) was effective and appropriate for the topic. | 1 | 2 | 3 | 4 | 5 | N/A |
| 9. I will incorporate the knowledge/skills gained from this workshop into my work. | 1 | 2 | 3 | 4 | 5 | N/A |
| 10. This workshop will contribute to my professional growth. | 1 | 2 | 3 | 4 | 5 | N/A |
| 11. I would like more advanced training in this area. | 1 | 2 | 3 | 4 | 5 | N/A |

PLEASE RESPOND TO THE FOLLOWING QUESTIONS:

What specific aspects of the workshop did you find most useful or helpful?

How did the use of technology allow you to participate in this workshop?

How could the workshop be improved (e.g., topic, presenter, facilitator, technology)?

What training do you need to better handle the job requirements of an interpreter?

5a. Were you satisfied with the:

Location	Yes	No	N/A	Parking/Transportation	Yes	No	N/A
Facility	Yes	No	N/A	Directions	Yes	No	N/A
Lighting	Yes	No	N/A	Seating	Yes	No	N/A
Visual Aids	Yes	No	N/A	Refreshments	Yes	No	N/A

5b. If no, do you have any suggestions for improvements?

6. How did you hear about this workshop?

Flyer _____ **Friend** _____ **Newspaper** _____ **Other** _____

Thank you for taking the time to complete this evaluation, it will help to improve the quality of future workshops!