

## Presentation Evaluation: Counseling and Substance Abuse Services

### Directions:

Circle the number that most closely corresponds to your evaluation of each aspect of the presentation. Evaluation should be of the overall presentation.

	Very Good	Good	Needs Improvement	Not Applicable		
<b>Presentation Material (visuals, props, etc):</b>						
1. Used appropriate visual aids.	5	4	3	2	1	N/A
2. Visual aids worked well across the entire presentation.	5	4	3	2	1	N/A
3. Visual aids were interesting.	5	4	3	2	1	N/A

### Organization/Content:

4. Presentation was well organized.	5	4	3	2	1	N/A
5. Presentation was effective in conveying information.	5	4	3	2	1	N/A
6. Length of presentation was appropriate.	5	4	3	2	1	N/A
7. Was the presenter prepared?	5	4	3	2	1	N/A

### Positive aspects of this session:

### Information I will use:

### Suggestions for change:

### Preference of presenter: (please circle one)

Peer educators

Professional Staff

No preference

### Overall reaction to the program: (please circle one)

High 5 4 3 2 1 Low

### Comments: