Disability and Rehabilitation with Asian/Pacific Islander Americans
August 18-September 16, 2008
Evaluation Form

I. Please take a few minutes to answer this questionnaire. Your feedback is important to us.

Featured segments (see outline): Excellent Good Average Fair Poor
Sessio ns I-IV 5 4 3 2 1
Sessions V-VII 5 4 3 2 1
Sessions VIII 5 4 3 2 1

Which segments had the greatest impact on you? Why?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

II. Overall Program and Sessions:

Overall satisfaction with trainers 5 4 3 2 1
Overall satisfaction with sessions 5 4 3 2 1
Overall satisfaction with registration 5 4 3 2 1
Overall satisfaction with the course 5 4 3 2 1

Was this an efficient use of your resources? Yes No
Were the workshops relevant for your work? Yes No

III. Please select all reasons for your participation:

_______ To learn how to work with minority and disability culture
_______ To network with other professionals in your field.
_______ To obtain practical strategies that can be integrated in your work.
_______ To earn Continuing Education
_______ Other:

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IV. What will you do with the knowledge you obtained during the course? (Select all that apply):

- Recommend this course to other colleagues/staff?
- Incorporate into a training or staff development program
- Approach your work in a new way
- Share with individuals and families you serve
- Other (describe) __________________________________________________

V. What improvements (logistics, schedule, content) would you recommend for the future?

What was the most valuable part of the course and why? ______________________

Please list up to 3 new insights you gained from this course.

1. ______________________________________________________________________

2. ______________________________________________________________________

3. ______________________________________________________________________

Please tell us about more about you.

1. What is your area of work and role? ________________________________________

Please email this survey to James D. Brightman, VR Coordinator, at jamesdb@hawaii.edu or fax it to (808) 956-7878. Thank you.

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