

# EVALUATION FORM

## MODULE 2 BECOMING MY BEST SELF: SELF-AWARENESS

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Center: \_\_\_\_\_

	Strongly agree			Strongly disagree	
1. The knowledge gained through this session is useful	1	2	3	4	5
2. The content shared was applicable to my work	1	2	3	4	5
3. The information was clear and easy to understand	1	2	3	4	5
4. The teaching methods used by the facilitators supported my learning	1	2	3	4	5
5. The material was presented in an organized manner	1	2	3	4	5

6. In your opinion, was this session:

a. Easy

b. Difficult

7. If difficult, what was difficult?

---

---

---

---

8. If easy, what was easy?

---

---

---

---

9. Which topics did you find most useful about the course?

---

---

---

---

11. What are your other suggestions to improve this session?

---

---

---

---

**Thank you.**