



# TTU MVP Green Zone Program Evaluation Form

MVP continually strives to improve our Green Zone Programing. Your input into the program which you recently attended will assist us with this process.

Module Attended: \_\_\_\_\_

Presenter's Name: \_\_\_\_\_

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

Your Name (optional): \_\_\_\_\_ Email: \_\_\_\_\_

Please indicate your level of satisfaction with each of the following:

Program met my expectations	<i>poor</i>	<i>fair</i>	<i>satisfactory</i>	<i>good</i>	<i>excellent</i>
Program content	<i>poor</i>	<i>fair</i>	<i>satisfactory</i>	<i>good</i>	<i>excellent</i>
Ability of presenter to communicate content	<i>poor</i>	<i>fair</i>	<i>satisfactory</i>	<i>good</i>	<i>excellent</i>
Content and usefulness of Printed Material-If used	<i>poor</i>	<i>fair</i>	<i>satisfactory</i>	<i>good</i>	<i>excellent</i>
Room in which program was held	<i>poor</i>	<i>fair</i>	<i>satisfactory</i>	<i>good</i>	<i>excellent</i>
Convenience of program day and time	<i>poor</i>	<i>fair</i>	<i>satisfactory</i>	<i>good</i>	<i>excellent</i>
Overall, how would you rate this program	<i>poor</i>	<i>fair</i>	<i>satisfactory</i>	<i>good</i>	<i>excellent</i>

If you answered "poor" or "fair" to any of the above please indicate your reasons:

\_\_\_\_\_  
\_\_\_\_\_

Would you recommend this program to your co-workers? Yes      No

How did you hear about this module? \_\_\_\_\_

What changes, if any, would you recommend for this module? \_\_\_\_\_

\_\_\_\_\_

Do you have any suggestions for future modules? \_\_\_\_\_

Additional Comments:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Submit form to MVP-Drane Hall Room 147, MS 5026 or by email to: [mvp@ttu.edu](mailto:mvp@ttu.edu)

Thank **YOU** for providing your feedback!

