

# Chapter Executive EVALUATION FORM



**SMACNA Chapter:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Date of Course:** \_\_\_\_\_

## Project Communication

**YOUR COMMENTS ON THIS COURSE WILL CONTRIBUTE TO IMPROVING THE COURSE.**

1. On a scale of 1-4 (with four being the highest), please circle the following:

|  | (lowest) |   |   | (highest) |
|--|----------|---|---|-----------|
| A. Usefulness of the course materials during the session:  | 1        | 2 | 3 | 4         |
| B. Instructor's knowledge of the subject matter:           | 1        | 2 | 3 | 4         |
| C. Instructor's ability to communicate the subject matter: | 1        | 2 | 3 | 4         |
| D. To what extent did the course meet your expectations?   | 1        | 2 | 3 | 4         |
| E. Overall, how would you evaluate this program?           | 1        | 2 | 3 | 4         |

2. Please list the number of participants that attended the course: \_\_\_\_\_ Members  
\_\_\_\_\_ Non-Members

### Questions:

3. Did you conduct this program with other building associations or chapters? \_\_\_ Yes \_\_\_ No  
If yes, please list the names of the other co-sponsoring organizations.

---

---

---

4. List below other business management related topics for localized training programs that you would like to see SMACNA offer.

---

---

---

5. Additional comments:

*Feel free to list any additional comments you may have on this course or the materials that were provided to you by SMACNA.*

---

---

---

***Please use the back of this form for any additional comments. Thank you for your input.***