



Course Evaluation

Accent 101: The Basic ABCs

Name _____

Please , as appropriate:

1. Approximately how many accent clients have you worked with?
 0 1 2-5 more than 5

2. On a scale of 1-5 (5 being highest) rate your level of preparedness for accent instruction work prior to this workshop:

1 2 3 4 5

Your preparedness now, at **end of training**

1 2 3 4 5

3. On a scale of 1-5 (5 being excellent) rate the following:

Meeting room set up	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Relevance of material	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Clarity of delivery	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Organization of material	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Videotape use	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Syllabus	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

Presentations on:

Intonation	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Vowels	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Consonants	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Instructions	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Marketing	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

OVERALL RATING: 1 2 3 4 5

4. Was the material: too easy too difficult about right

5. Was the material (yes or no) Challenging? yes no
Interesting? yes no

6. What was particularly helpful? _____

7. What was least helpful? _____

8. What improvements can you suggest for the next basic workshop?

FINAL COMMENTS: *May we quote?* yes no