

SHRM Competency Based Education for Chapters

Evaluation Feedback Form

Course Name: _____

Instructor Name: _____

Chapter: _____ Course Date: _____

1. On a scale of 1-5, with 1 being the lowest and 5 the highest, what were was your overall impression of the workshop? What improvements would you recommend for this and future offerings?

2. On a scale of 1-5, with 1 being the lowest and 5 the highest, how would you rate the facilitator of the workshop? Please provide feedback and recommendations for improvement, if applicable.

3. Did the materials (PowerPoint, videos, and workbook) add value to understanding the course content? If no, please provide detailed information on your challenges.

4. What additional topics would you like SHRM to explore for future offerings?
