

Healthy Homes for Community Health Workers – Evaluation Form

Please help us improve! Your input is critical in determining how this course may impact your work and how the course might be improved.

Overall Evaluation

1. My overall evaluation of the course is:	EXCELLENT	GOOD	FAIR	POOR
2. Overall quality of presentations:	EXCELLENT	GOOD	FAIR	POOR
3. Did the program meet your expectations?	YES	PARTLY	NO	
4. Would you tell a friend to take this course?	YES	MAYBE	NO	
5. Can you use information right away?	YES	SOME	NO	
6. What did you like best about the course?				
7. What did you like least about the course?				

Format and Materials

1. Was there enough time for discussion and questions?	YES	NO
2. Did you have enough time to practice delivering the information?	YES	NO
3. Was the Presentation Review Form useful? (The form for evaluating other presenters in your small group). If no, why not?	YES	NO

4. Was the Supplies Checklist and Lesson Plan useful? If no, why not?	YES	NO
5. Was it important to you to have a trainer sign the Student One on One Presentation form to show that you successfully demonstrated delivering healthy homes information?	YES	NO
6. Was the Community Action for Healthy Housing flyer useful? If no, why not?	YES	NO

After the Training

1. Do you now feel comfortable talking to a client or group about healthy homes? If not, what do you need to be comfortable doing that?	YES	NO				
2. Which handout do you think will the most useful when you talk to clients or groups?						
3. Which handout do you think will the least useful when you talk to client	s or groups?					

Name (Optional): _____