

Participate in Dispute Resolution: Strategic Conflict Management for Professionals (Module 1/2)

Singapore
Mediation
Centre



WORKSHOP EVALUATION FORM <Date>

NAME: _____

The Singapore Mediation Centre has a commitment to quality in professional development and continuous improvement. Your feedback will assist us to maintain and improve the quality and relevance of future training courses. It will also help us in providing professional development activities that will meet your needs.

Please circle your response to each statement.		Excellent	Very Good	Good	Fair	Poor	Not Applicable
1. What is your summary evaluation of the overall workshop?		1	2	3	4	5	0
2. How well did the overall workshop achieve its objectives?		1	2	3	4	5	0
3. What is your overall impression of the workshop in terms of:							
a) Substance		1	2	3	4	5	0
b) Structure		1	2	3	4	5	0
c) Interest		1	2	3	4	5	0
d) Presentation		1	2	3	4	5	0
4. What is your overall impression of the group discussions in terms of:							
a) Substance		1	2	3	4	5	0
b) Structure		1	2	3	4	5	0
c) Interest		1	2	3	4	5	0
d) Guidance from the course instructors		1	2	3	4	5	0
5. What is your overall impression of the various exercises?							
a) Value of feedback from course instructors		1	2	3	4	5	0
b) Value of feedback from other participants		1	2	3	4	5	0
6. How would you rate the course instructors	Name of Trainer A:						
a) Substantive knowledge	1	2	3	4	5	0	
b) Ability to respond to questions effectively	1	2	3	4	5	0	
c) Ability to provide practical guidance	1	2	3	4	5	0	

PLEASE TURN OVER

7. How would you rate the course instructors	Name of Coach:					
a) Substantive knowledge	1	2	3	4	5	0
b) Ability to respond to questions effectively	1	2	3	4	5	0
c) Ability to provide practical guidance	1	2	3	4	5	0
8. How well organised was the workshop?	1	2	3	4	5	0
9. How well did the workshop meet your expectations in terms of:						
a) Imparting mediation skills/ techniques	1	2	3	4	5	0
b) Addressing your concerns as a mediator	1	2	3	4	5	0

10. How did you get to know about our workshops?
(E.g. SMC mailing list / SAL Newsletter / SAL website /recommendations from friends, colleagues etc)

11. What did you like best about the workshop?

12. What did you like least about the workshop?

13. What would you like done or included in future workshops?

14. Please give us any additional comments below:

15. If you wish to join our mailing list for information on future training, please state your email address clearly:

THANK YOU!