CLE – FORMAT 3

WEB CONFERENCE EVALUATION FORM

Name *(Optional):*		**Date:**	
Name of Course:			
Location:		**Address:**	

Please return this completed form to Sharon Pedersen at spedersen@namadr.com.

Sponsor: NAM (National Arbitration and Mediation)

Date of Program:

Format: Web Conference Presentation

Course Evaluation:
Evaluate this course by placing a check in the appropriate box.

	Excellent	Good	Fair	Poor	N/A
Program Content	☐	☐	☐	☐	☐
Instructor Quality	☐	☐	☐	☐	☐
Written Materials	☐	☐	☐	☐	☐
Effectiveness of Technology	☐	☐	☐	☐	☐

Comments.