

Evaluation Form: Session 3

Date:

Please complete this form and submit to the facilitator before you leave. You are not required to put your name on the form.

Please tick your answer to questions in the boxes to the left.			
	Yes, Definitely	Somewh at	No, Not at All
Did you understand the information presented?			
Did you learn new ideas or skills?			
Can you identify Erikson's stages of personality development?			
Can you identify ways you can help with a child's developmental needs?[what does this mean?]			
Can you identify ways you can work with parents to improve their capacity to parent? ????			
Can you identify ways to influence the family and environmental factors which enhance child protection? ???			
Do you understand the kind of interviewing skills which are necessary to work with children?			
Did you like the way the session was facilitated?			

What was your favourite part of this session?

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What did you not like about the session?

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How could the session be improved?

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How will you use the knowledge you have gained?.....

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What would help to prepare you better to use the knowledge you have gained?

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How useful are the handouts or leaflets that you received?.....