

Lesson Evaluation

Please fill out this evaluation sheet and return it to the instructor.

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| 1. Were your expectations of this course met? | Yes | No | N/A |
| 2. What would you have liked to learn that you didn't? | | | |
| <hr/> | | | |
| 3. What was the most helpful thing you learned? | | | |
| <hr/> | | | |
| 4. Would you recommend this class to a friend? | Yes | No | N/A |
| 5. Please share comments about any aspect of the day. | | | |
