

Workshop Evaluation

Workshop date:	Facilitator:
Location:	Your organization/affiliation (optional):

Please circle a number to rate the following statements.

	1 Strongly Disagree	2 Disagree	3 Neutral	4 Agree	5 Strongly Agree
I found the workshop to be useful and informative.					
The facilitator(s) was organized and easy to follow.					
I understand my role and responsibilities as a Gatekeeper.					
I feel empowered to make referrals if needed.					
I believe the Gatekeeper Program will make an impact by making my community safer for older adults.					

1. What was the best part of the workshop?

2. Was there anything that surprised you?

3. Are there any changes you could suggest?

Other comments:

Thank you for your feedback!