

Las Positas College
Professional Development Workshop
Evaluation Form

Workshop Title: Self-Directed Learning Using the OERI Course Design Rubric Date: 01/27/2019
 Presenter: Cheryl & Frank Lake Time: 2:00

Please complete all fields to the best of your ability. Use the information you may be using to complete this form.

Please indicate all fields in which you are providing a response. Please do not use all of the following:

Statement	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. The content of the workshop was as described when announced.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. The material was presented in an organized manner.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I learned new strategies or approaches I can apply to my job.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. I would be interested in learning more about this topic.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

LPC Employee: Full-time Faculty Classified Professional Other (please specify)
 Classification: Full-time Faculty Administrator

Optional: Please provide written comments in feedback for presenters on the back side of this form.

192088 OFFICIAL USE ONLY
Workshop Code P-16

Thank you for your feedback!
Please take us home to presenter.

Las Positas College
Professional Development Workshop
Evaluation Form

Workshop Title: Self-Directed Learning Using the OERI Course Design Rubric Date: 01/27/2019
 Presenter: Cheryl & Frank Lake Time: 2:00

Please complete all fields to the best of your ability. Use the information you may be using to complete this form.

Please indicate all fields in which you are providing a response. Please do not use all of the following:

Statement	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. The content of the workshop was as described when announced.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. The material was presented in an organized manner.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I learned new strategies or approaches I can apply to my job.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. I would be interested in learning more about this topic.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

LPC Employee: Full-time Faculty Classified Professional Other (please specify)
 Classification: Full-time Faculty Administrator

Optional: Please provide written comments in feedback for presenters on the back side of this form.

192088 OFFICIAL USE ONLY
Workshop Code P-16

Thank you for your feedback!
Please take us home to presenter.

Las Positas College
Professional Development Workshop
Evaluation Form

Workshop Title: Self-Directed Learning Using the OERI Course Design Rubric Date: 01/27/2019
 Presenter: Cheryl & Frank Lake Time: 2:00

Please complete all fields to the best of your ability. Use the information you may be using to complete this form.

Please indicate all fields in which you are providing a response. Please do not use all of the following:

Statement	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. The content of the workshop was as described when announced.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. The material was presented in an organized manner.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I learned new strategies or approaches I can apply to my job.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. I would be interested in learning more about this topic.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

LPC Employee: Full-time Faculty Classified Professional Other (please specify)
 Classification: Full-time Faculty Administrator

Optional: Please provide written comments in feedback for presenters on the back side of this form.

192088 OFFICIAL USE ONLY
Workshop Code P-16

Thank you for your feedback!
Please take us home to presenter.

Las Positas College
Professional Development Workshop
Evaluation Form

Workshop Title: Self-Directed Learning Using the OERI Course Design Rubric Date: 01/27/2019
 Presenter: Cheryl & Frank Lake Time: 2:00

Please complete all fields to the best of your ability. Use the information you may be using to complete this form.

Please indicate all fields in which you are providing a response. Please do not use all of the following:

Statement	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. The content of the workshop was as described when announced.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. The material was presented in an organized manner.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I learned new strategies or approaches I can apply to my job.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. I would be interested in learning more about this topic.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

LPC Employee: Full-time Faculty Classified Professional Other (please specify)
 Classification: Full-time Faculty Administrator

Optional: Please provide written comments in feedback for presenters on the back side of this form.

192088 OFFICIAL USE ONLY
Workshop Code P-16

Thank you for your feedback!
Please take us home to presenter.

Las Positas College
Professional Development Workshop
Evaluation Form

Workshop Title: Self-Directed Learning Using the OERI Course Design Rubric Date: 01/27/2019
 Presenter: Chris Lee Time: 11:25

Please complete all fields to the best of your ability. Use the information you may be using to complete this form.

Please indicate all fields in which you are providing a response. Please do not use all of the following:

Statement	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. The content of the workshop was as described when announced.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. The material was presented in an organized manner.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I learned new strategies or approaches I can apply to my job.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. I would be interested in learning more about this topic.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

LPC Employee: Full-time Faculty Classified Professional Other (please specify)
 Classification: Full-time Faculty Administrator

Optional: Please provide written comments in feedback for presenters on the back side of this form.

192088 OFFICIAL USE ONLY
Workshop Code P-16

Thank you for your feedback!
Please take us home to presenter.



Las Positas College
Professional Development Workshop
Evaluation Form

Workshop Title: Making Your Canvas Course Site ADA-Compliant Date: 10/22/2019

Presenter: Wanda B. & Scott A. V. Time: 2 - 3:30 pm

Please complete all the items in which you agree. Use a pencil or black or blue ink pen. Please do not use gel pens.

Please tell us whether you **AGREE** or **DISAGREE** with the following statements:

Statement	Strongly Agree	Agree	Disagree	Strongly Disagree
1. The content of the workshop was as described when announced.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. The material was presented in an organized manner.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I learned new strategies or approaches I can apply to my job.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. I would be interested in learning more about this topic.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Optional: Please provide written comments or feedback for presenters on the back side of this form.

192220 OFFICIAL USE ONLY Workshop Code #16 Thank you for your feedback! Please turn in form to presenter.



Las Positas College
Professional Development Workshop
Evaluation Form

Workshop Title: Making Your Canvas Course Site ADA-Compliant Date: 10/22/2019

Presenter: Wanda B. & Scott A. V. Time: 2 - 3:30 pm

Please complete all the items in which you agree. Use a pencil or black or blue ink pen. Please do not use gel pens.

Please tell us whether you **AGREE** or **DISAGREE** with the following statements:

Statement	Strongly Agree	Agree	Disagree	Strongly Disagree
1. The content of the workshop was as described when announced.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. The material was presented in an organized manner.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I learned new strategies or approaches I can apply to my job.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. I would be interested in learning more about this topic.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Optional: Please provide written comments or feedback for presenters on the back side of this form.

192220 OFFICIAL USE ONLY Workshop Code #16 Thank you for your feedback! Please turn in form to presenter.



Las Positas College
Professional Development Workshop
Evaluation Form

Workshop Title: Making Your Canvas Course Site ADA-Compliant Date: 10/22/2019

Presenter: Scott A. VandeB... Time: 2 - 3:30 pm

Please complete all the items in which you agree. Use a pencil or black or blue ink pen. Please do not use gel pens.

Please tell us whether you **AGREE** or **DISAGREE** with the following statements:

Statement	Strongly Agree	Agree	Disagree	Strongly Disagree
1. The content of the workshop was as described when announced.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. The material was presented in an organized manner.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I learned new strategies or approaches I can apply to my job.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. I would be interested in learning more about this topic.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Optional: Please provide written comments or feedback for presenters on the back side of this form.

192220 OFFICIAL USE ONLY Workshop Code #16 Thank you for your feedback! Please turn in form to presenter.



Las Positas College
Professional Development Workshop
Evaluation Form

Workshop Title: Making Your Canvas Course Site ADA-Compliant Date: 10/22/2019

Presenter: Time:

Please complete all the items in which you agree. Use a pencil or black or blue ink pen. Please do not use gel pens.

Please tell us whether you **AGREE** or **DISAGREE** with the following statements:

Statement	Strongly Agree	Agree	Disagree	Strongly Disagree
1. The content of the workshop was as described when announced.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. The material was presented in an organized manner.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I learned new strategies or approaches I can apply to my job.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. I would be interested in learning more about this topic.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Optional: Please provide written comments or feedback for presenters on the back side of this form.

192220 OFFICIAL USE ONLY Workshop Code #16 Thank you for your feedback! Please turn in form to presenter.



Las Positas College
Professional Development Workshop
Evaluation Form

Workshop Title: Making Your Canvas Course Site ADA-Compliant Date: 10/22/2019

Presenter: Scott A. VandeB... Time: 2 - 3:30 pm

Please complete all the items in which you agree. Use a pencil or black or blue ink pen. Please do not use gel pens.

Please tell us whether you **AGREE** or **DISAGREE** with the following statements:

Statement	Strongly Agree	Agree	Disagree	Strongly Disagree
1. The content of the workshop was as described when announced.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. The material was presented in an organized manner.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I learned new strategies or approaches I can apply to my job.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. I would be interested in learning more about this topic.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Optional: Please provide written comments or feedback for presenters on the back side of this form.

192220 OFFICIAL USE ONLY Workshop Code #16 Thank you for your feedback! Please turn in form to presenter.



Las Positas College
Professional Development Workshop
Evaluation Form

Workshop Title: Making Your Career Course Site ADA-Compliant Date: 10/22/2019

Presenter: Scott Vigalton + Wanda Kattaly Time: 2:00 - 3:00

Please completely fill the circle to select your answer. Use a pencil or black or blue ink pen. Please do not use gel pens.

Please fill in whether you **AGREE** or **DISAGREE** with the following statements:

	Strongly Agree	Agree	Disagree	Strongly Disagree
1. The content of the workshop was as described when announced.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. The material was presented in an organized manner.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I learned new strategies or approaches I can apply to my job.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. I would be interested in learning more about this topic.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. LPC Employee Classification: Full-Time Faculty Classified Professional Other (please specify) _____
 Part-Time Faculty Administrator

Optional: Please provide written comments or feedback for presentation on the back side of this form.

19220 OFFICIAL USE ONLY Workshop Code (FTR) Thank you for your feedback! Please turn in forms to presenter.



Las Positas College
Professional Development Workshop
Evaluation Form

Workshop Title: Making Your Career Course Site ADA-Compliant Date: 10/22/2019

Presenter: Scott Vigalton + Wanda Kattaly Time: 2:00 - 3:00

Please completely fill the circle to select your answer. Use a pencil or black or blue ink pen. Please do not use gel pens.

Please fill in whether you **AGREE** or **DISAGREE** with the following statements:

	Strongly Agree	Agree	Disagree	Strongly Disagree
1. The content of the workshop was as described when announced.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. The material was presented in an organized manner.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I learned new strategies or approaches I can apply to my job.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. I would be interested in learning more about this topic.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. LPC Employee Classification: Full-Time Faculty Classified Professional Other (please specify) _____
 Part-Time Faculty Administrator

Optional: Please provide written comments or feedback for presentation on the back side of this form.

19220 OFFICIAL USE ONLY Workshop Code (FTR) Thank you for your feedback! Please turn in forms to presenter.



Las Positas College
Professional Development Workshop
Evaluation Form

Workshop Title: Making Your Career Course Site ADA-Compliant Date: 10/22/2019

Presenter: Scott + Wanda Time: 2:00-4:00

Please completely fill the circle to select your answer. Use a pencil or black or blue ink pen. Please do not use gel pens.

Please fill in whether you **AGREE** or **DISAGREE** with the following statements:

	Strongly Agree	Agree	Disagree	Strongly Disagree
1. The content of the workshop was as described when announced.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. The material was presented in an organized manner.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I learned new strategies or approaches I can apply to my job.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. I would be interested in learning more about this topic.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. LPC Employee Classification: Full-Time Faculty Classified Professional Other (please specify) _____
 Part-Time Faculty Administrator

Optional: Please provide written comments or feedback for presentation on the back side of this form.

19220 OFFICIAL USE ONLY Workshop Code (FTR) Thank you for your feedback! Please turn in forms to presenter.



Las Positas College
Professional Development Workshop
Evaluation Form

Workshop Title: Making Your Career Course Site ADA-Compliant Date: 10/22/2019

Presenter: Scott Vigalton + Wanda Kattaly Time: 2-4

Please completely fill the circle to select your answer. Use a pencil or black or blue ink pen. Please do not use gel pens.

Please fill in whether you **AGREE** or **DISAGREE** with the following statements:

	Strongly Agree	Agree	Disagree	Strongly Disagree
1. The content of the workshop was as described when announced.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. The material was presented in an organized manner.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I learned new strategies or approaches I can apply to my job.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. I would be interested in learning more about this topic.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. LPC Employee Classification: Full-Time Faculty Classified Professional Other (please specify) _____
 Part-Time Faculty Administrator

Optional: Please provide written comments or feedback for presentation on the back side of this form.

19220 OFFICIAL USE ONLY Workshop Code (FTR) Thank you for your feedback! Please turn in forms to presenter.



Las Positas College
Professional Development Workshop
Evaluation Form

Workshop Title: Making Your Career Course Site ADA-Compliant Date: 10/22/2019

Presenter: Scott Vigalton + Wanda Time: 2-4 pm

Please completely fill the circle to select your answer. Use a pencil or black or blue ink pen. Please do not use gel pens.

Please fill in whether you **AGREE** or **DISAGREE** with the following statements:

	Strongly Agree	Agree	Disagree	Strongly Disagree
1. The content of the workshop was as described when announced.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. The material was presented in an organized manner.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I learned new strategies or approaches I can apply to my job.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. I would be interested in learning more about this topic.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. LPC Employee Classification: Full-Time Faculty Classified Professional Other (please specify) _____
 Part-Time Faculty Administrator

Optional: Please provide written comments or feedback for presentation on the back side of this form.

19220 OFFICIAL USE ONLY Workshop Code (FTR) Thank you for your feedback! Please turn in forms to presenter.