

Exploring the Small Farm Dream Course Participant's Evaluation Form

Your feedback is important to us! In addition to the information we ask you to provide below, we welcome any information you are willing to share about your experience taking this course.

Course Sponsor & Dates:

Instructor #1:
Instructor #2:

Please circle the number that most closely matches your opinion in each of the following areas:

	<u>Not Applic.</u>	<u>Poor</u>		<u>Satisfactory</u>		<u>Excellent</u>
Usefulness of Course	N/A	1	2	3	4	5
Overall Quality of Course	N/A	1	2	3	4	5
Quality of Instruction/Facilitation						
Instructor #1	N/A	1	2	3	4	5
Instructor #2	N/A	1	2	3	4	5
Information Gained	N/A	1	2	3	4	5
Quality/Relevance of workbook	N/A	1	2	3	4	5
Quality/Relevance of website	N/A	1	2	3	4	5

Please answer the following questions. Use the back of this sheet if more space is required.

1. Do you feel better able now (than at the start of the course) to answer the question "Am I ready to start an agricultural business"? Yes _____ No _____
2. Was the # of sessions a) too few _____ b) too many _____ c) just about right _____
3. Was the course length a) too short _____ b) too long _____ c) just about right _____
4. What was the single most important thing that you gained from the course?
5. What could we do to make this course more useful for you?

Comments: *(Please use the reverse of this page to make comments and elaborate on any point above that you rated 3 or below.)* **Thank you!**