

WORKSHOP EVALUATION FORM (FOR FACILITATORS)

Please attach diversity Monitoring summary sheet & participant's evaluation summary sheet

Workshop location:								
Dates:			Level: L1 / L2 / TforF Part 1 / TforF Part 2					
If Level 2, what was the theme?								
Facilitators (please indicate which were lead [L] and apprentice [A]):								
Total participants starting:			Completing:			Total workshop session time (excluding meal breaks):		
How did the team function?								
Were there factors influencing the workshop (e.g. group size, special needs...)?								
What went well?								
What went less well?								
Were there any safeguarding concerns? If so, what action was taken?								
There are lessons to learn from every workshop: what did team members learn this time?								

Did you identify any facilitator training needs?

Please comment on the level and quality of support from the AVP region hosting the workshop, with any suggestions:

Please note any interesting specific comments or general feedback from participants:

Thank you for filling out this form. Every form is read carefully and the findings are summarised and reported on at the year's end so that we can improve what we do.