

**FEEDBACK SUMMARY FOR COURSES**

|  |
| --- |
| **Course:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Course Dates**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Presenter(s)**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **# of Attendees**: \_\_\_\_\_\_\_\_ **# of Feedback Forms**: \_\_\_\_\_\_\_\_**# Attendees at Session #1**: \_\_\_\_\_\_\_\_ **#2**: \_\_\_\_\_\_\_\_\_ **#3**: \_\_\_\_\_\_\_\_\_ **#4**: \_\_\_\_\_\_\_\_ |
| **Attendee Feedback on Course** |  |
| **Attendee General Suggestions** |  |
| **Zoom Class?** | **If this class were offered on-line, would you consider zoom if you could not attend in person:****Yes #:** \_\_\_\_\_\_\_\_\_\_\_\_ **No #:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Did Not Answer #:** \_\_\_\_\_\_\_\_\_\_\_\_ |
| **Potential Volunteers** | **Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Email:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Telephone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*Note: This information should be shared with the Volunteer Chair at* vol@aikenlearning.org  |