

# **Evaluation**

STATE AND FEDERAL PROGRAMS  
(Conference/Workshop)

PROGRAM TITLE: \_\_\_\_\_

CONFERENCE TITLE \_\_\_\_\_

LOCATION: \_\_\_\_\_

DATE: \_\_\_\_\_

PURPOSE: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

CRITIQUE: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_