



South Carolina Department on Aging

Evaluation Questions – Nutrition Education Sessions

Date: _____ Region/Provider: _____

Meal Site Name: _____ # of participants: _____

Session Title & Presenter Name:

At the end of the session, nutrition education participants are to answer the questions on this form to aid in evaluating the nutrition education session. If additional questions are asked, please note the questions and responses. This information will be used to evaluate the programs performance.

1) Did participants in today's lesson find the information useful? (# of responses for each)

_____ Very Useful _____ Useful _____ Somewhat Useful _____ Not at all Useful

Please explain:

2) What did participants like the most about the session?

3) What did the participants like the least about the session?

4) What changes, if any, did the participants state they were going to make because of the lesson?

Thank you for teaching nutrition education sessions. Your evaluations will be very helpful as program development continues.