Speaker Name: ____________________________________

Please write any comments about this presentation and/or ideas for future presentations on the back.

1. Rate your understanding of this topic **before** the session:
   __Uninformed  __Slight  __Moderate  __Good  __Excellent

2. Rate your understanding of the topic **after** the session:
   __Uninformed  __Slight  __Moderate  __Good  __Excellent

3. Are you planning to use information/skills from this session in your operation/job?
   ___ No  ___ Unsure ___ Maybe ___Likely___ Definitely

4. Within which of the following time frames do you plan to use this information/skills?
   ___ Never ___ 1 year ___ 6 months ___ 3 months ___Now

5. Overall, how would you rate this presentation?
   ___ Poor ___ Okay ___ Good ___Very Good ___Excellent

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**Figure 3.** Needs Assessment evaluations that are completed at each presentation during conference and field day events by every attendee.