

*Supreme Court of the State of New York
Appellate Division, First Judicial Department*

**CLE EVALUATION FORM
DVD Format**

Program Title: _____

Date of Original Program: _____

1. My expectations in viewing this program was achieved:

- completely
- adequately
- inadequately
- not at all

5. Do you have any suggestions for topics or speakers for future seminars?

2. The information presented, including materials, was:

- very useful to me
- of some use to me
- not much use to me

6. Overall, this session was:

- excellent
- good
- fair
- poor

3. The amount of information presented was:

- just right
- too much
- too little

4. The presenter(s) were:

- | | | | |
|------------------------------------|------------------------------------|------------------------------------|------------------------------------|
| <input type="checkbox"/> excellent | <input type="checkbox"/> excellent | <input type="checkbox"/> excellent | <input type="checkbox"/> excellent |
| <input type="checkbox"/> good | <input type="checkbox"/> good | <input type="checkbox"/> good | <input type="checkbox"/> good |
| <input type="checkbox"/> fair | <input type="checkbox"/> fair | <input type="checkbox"/> fair | <input type="checkbox"/> fair |
| <input type="checkbox"/> poor | <input type="checkbox"/> poor | <input type="checkbox"/> poor | <input type="checkbox"/> poor |

Comments:

PLEASE RETURN THIS FORM WITH THE ATTORNEY AFFIRMATION