



COLLEGE OF PHARMACISTS OF MANITOBA
 200 TACHÉ AVENUE
 WINNIPEG, MANITOBA R2H 1A7
 PHONE. 204.233.1411 FAX (204) 237-3468
 EMAIL: INFO@CPHM.CA

LEARNING ACTIVITY EVALUATION FORM

Instructions:

- Download and save this fillable PDF Form. Then complete the form by entering information in all required fields
- Once completed, click the SUBMIT FORM button at the top of the form
- Your submission will be delivered to the CPhM automatically
- Upon approval, a Statement of Participation will be sent to you at the email address you list below
- Please allow 3 weeks for processing. Any questions or comments can be directed to profdevelopment@cphm.ca

Name:	License Number:	Today's Date:
Email Address:		Practice Area:
Learning Activity Title:		
Date of Completion:		

Please indicate your level of agreement of each statement by rating the learning activity on a scale of 1-5:

- | | |
|----------------------------|--------------------|
| 1 = Strongly disagree | 4 = Agree |
| 2 = Disagree | 5 = Strongly agree |
| 3 = Neither agree/disagree | |

The content of the activity was useful and relevant to my role as a healthcare provider.	
The activity met the stated learning objectives.	
The depth of the activity was at just the right level.	
The learning activity met my individual learning needs.	
The activity was well organized.	
I learned something that I can apply to my practice.	
The methods of instruction used made it possible to understand and apply the information in an effective manner.	
The presenter delivered the information clearly.	
I would recommend this activity to my colleagues.	
What is your overall evaluation of the speaker(s) for this activity?	
If applicable, list the names of multiple speakers and rate your evaluation of each individual speaker:	
Speaker #1 name:	
Speaker #2 name:	
Speaker #3 name:	
Speaker #4 name:	

Did you note any bias in any aspect of this learning activity? <i>If "yes", please explain:</i>	Yes	No

What was the most valuable aspect of this learning activity?

What was the least valuable aspect of this learning activity?

Describe **at least one** change you will make in your practice as a result of this activity?

General comments: