

**Spokane County Bar Association  
SEMINAR EVALUATION FORM**

**Spokane County Title 11 Court Visitor Training  
Initial Certification Agenda  
October 28, 2021**

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We want every program we offer to meet or exceed your expectations -- and more importantly -- to provide information useful to your practice. This form helps us measure our success in meeting those goals and enlists your input in setting future goals. Please take a few minutes and let us know how we are doing?

THANK YOU!

1. Years in practice: \_\_\_\_\_
2. Primary areas of practice: #1. \_\_\_\_\_ #2. \_\_\_\_\_ #3. \_\_\_\_\_
3. The size of your firm or department?  Sole Pract.  2-10  11-20  21-30  31 or more
4. In regards to the registration fee, do you think the price was:  Expensive  Fair  Inexpensive
5. Please give your opinion of the course materials:  Excellent  Good  Average  Poor
6. If you rated "2" or less for a speaker, identify the speaker and why you gave the rating. . . .  
\_\_\_\_\_
7. Any problems with the meeting location?:  Noise  Lighting  Temperature  Parking  Beverage/Food Svc.  
Comments: \_\_\_\_\_
8. Additional comments on the usefulness of the program: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
9. How could we improve this seminar? \_\_\_\_\_  
\_\_\_\_\_
10. What topics would you like to see presented at future seminars? (Include the level of subject matter -- basic to advanced, case and statutes, skills training courses, etc.)  
\_\_\_\_\_  
\_\_\_\_\_
11. Are you interested in speaking at a future seminar? \_\_\_\_\_  
If so, provide topic of discussion. \_\_\_\_\_  
\_\_\_\_\_

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**Seminar Evaluation Form Continued**

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12. Please rate the speakers/topics you heard by circling the appropriate number. *(We encourage you to add written comments)*

**(7-Excellent 6-Very Good 5-Good 4-Average 3-Fair 2-Poor 1-Very Poor)**

	<b>Content</b>	<b>Organization</b>	<b>Delivery</b>
<b>BILL DODGE</b>	<b>7 6 5 4 3 2 1</b>	<b>7 6 5 4 3 2 1</b>	<b>7 6 5 4 3 2 1</b>

Comments: \_\_\_\_\_

<b>BRENT STANYER</b>	<b>7 6 5 4 3 2 1</b>	<b>7 6 5 4 3 2 1</b>	<b>7 6 5 4 3 2 1</b>
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Comments: \_\_\_\_\_

<b>SHARON SAITO</b>	<b>7 6 5 4 3 2 1</b>	<b>7 6 5 4 3 2 1</b>	<b>7 6 5 4 3 2 1</b>
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Comments: \_\_\_\_\_

<b>CATHERINE KARDONG</b>	<b>7 6 5 4 3 2 1</b>	<b>7 6 5 4 3 2 1</b>	<b>7 6 5 4 3 2 1</b>
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Comments: \_\_\_\_\_

<b>KELLY MOORE</b>	<b>7 6 5 4 3 2 1</b>	<b>7 6 5 4 3 2 1</b>	<b>7 6 5 4 3 2 1</b>
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Comments: \_\_\_\_\_

<b>ANDERSON/FORTSON</b>	<b>7 6 5 4 3 2 1</b>	<b>7 6 5 4 3 2 1</b>	<b>7 6 5 4 3 2 1</b>
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Comments: \_\_\_\_\_

Your Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

NOTE: To receive proper credit for seminar attendance, the registration fee must be paid in advance or at the door. **You will not receive accreditation until the registration fee has been paid.** Please return this form to the registrar at the end of the seminar or mail to:

Spokane County Bar Association, CLE Department  
1116 West Broadway Avenue, 4th Floor Annex  
Spokane, Washington 99260-0030  
[MWardrop@SpokaneBar.org](mailto:MWardrop@SpokaneBar.org)