

# Activity Evaluation Form for Nevada

Please complete and return to Provider

Provider: Association of Corporate Counsel  
 Subject Matter/Title: "Electronic Discovery Documents: How To Be Prepared; and Labor & Employment Issues Facing Nevada Employers"  
 Date and Time of Activity: Monday, March 20, 2006 11:30 PM TO 2:00 PM  
 Location: The Wynn Las Vegas  
 Length of Activity: 2 Hour CLE Credits

Name of Participant (optional) \_\_\_\_\_  
*First Last*

**Directions:** On a scale of 1-5 (5 being the highest, best or most and 1 being the least, lowest or worst) rate by circling the number reflecting your opinion.

**To what extent were your personal objectives satisfied?** - 5 4 3 2 1  
 Comments: \_\_\_\_\_

**To what extent did the environment contribute to the learning experience?** - 5 4 3 2 1  
 Comments: \_\_\_\_\_

**To what extent did the written materials contribute to the learning experience?** - 5 4 3 2 1  
 Comments: \_\_\_\_\_

**To what extent were the objectives stated in the promotional literature or those stated at the beginning of the activity satisfied?** - 5 4 3 2 1  
 Comments: \_\_\_\_\_

**To what extent did the activity contain significant current intellectual or practical content?** - 5 4 3 2 1  
 Comments: \_\_\_\_\_

Please rate the faculty on the same scale.

	Overall Teaching Effectiveness	Effectiveness of Teaching Methods	Sign. Current Practical or Intellectual Content
Instructor's Name: _____	5 4 3 2 1	5 4 3 2 1	5 4 3 2 1
Subject/Topic: _____			
Comments: _____			
Instructor's Name: _____	5 4 3 2 1	5 4 3 2 1	5 4 3 2 1
Subject/Topic: _____			
Comments: _____			
Instructor's Name: _____	5 4 3 2 1	5 4 3 2 1	5 4 3 2 1
Subject/Topic: _____			
Comments: _____			

Other Comments: