

# ACTIVITY EVALUATION FORM FOR CALIFORNIA MCLE

Please complete and return to Provider

Please Print

Provider Name Sonoma County BAR ASSOCIATION  
 Provider Phone # /  
 Provider Address \_\_\_\_\_  
 Title of Activity MANDATORY FEE ADD PROG  
 Date of Offering 9-20-07 Site SANTA ROSA  
 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?

Comments: \_\_\_\_\_ 5 (4) 3 2 1

To what extent did the environment contribute to the learning experience?

Comments: \_\_\_\_\_ 5 (4) 3 2 1

To what extent did the written materials contribute to the learning experience?

Comments: \_\_\_\_\_ 5 (4) 3 2 1

To what extent were the objectives stated in the promotional literature or those stated at the beginning of the activity satisfied?

Comments: \_\_\_\_\_ 5 (4) 3 2 1

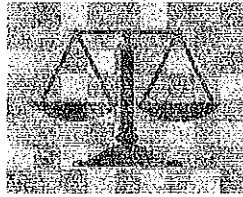
To what extent did the activity contain significant current intellectual or practical content?

Comments: \_\_\_\_\_ 5 (4) 3 2 1

Please rate the faculty on the same scale.

	Overall Teaching Effectiveness	Effectiveness of Teaching Methods	Significant Current Intellectual or Practical Content
Instructor's Name: <u>Joel MARIC</u>	5 (4) 3 2 1	(5) 4 3 2 1	(5) 4 3 2 1
Subject/Topic: _____			
Comments: _____			
Instructor's Name: <u>Julie Spelman</u>	5 (4) 3 2 1	(5) 4 3 2 1	(5) 4 3 2 1
Subject/Topic: _____			
Comments: _____			
Instructor's Name: <u>Michael Fish</u>	5 (4) 3 2 1	(5) 4 3 2 1	(5) 4 3 2 1
Subject/Topic: _____			
Comments: _____			

# SONOMA COUNTY BAR ASSOCIATION

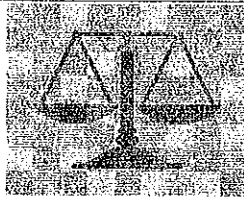


## Mandatory Continuing Legal Education Evaluation Form

<b>Mandatory Continuing Legal Education</b> <b>Sponsor: SCBA and State Bar of CA Fee Arbitration Program</b> <b>Program: Fee Arbitration Program</b> <b>Date: September 20, 2007</b> <b>Time: 5:00 - 8:30 p.m.</b> <b>Place: 37 Old Courthouse Square, Suite 100</b> <b>Credit Units: 1 Unit Ethics 1.75 General</b>	P o o r		Good		E x c e l l e n t
1. To what extent were your personal objectives satisfied? Comments:	1	2	3	4	5
2. To what extent did the environment contribute to the learning experience? Comments:	1	2	3	4	5
3. To what extent did the written materials contribute to the learning experience? Comments:	1	2	3	4	5
4. To what extent were the objectives stated in the promotional literature or those stated at the beginning of the activity satisfied? Comments:	1	2	3	4	5
5. To what extent did the activity contain significant current Intellectual or practical content? Comments:	1	2	3	4	5
6. Instructors Name: Comments:	1	2	3	4	5
7. Instructors Name: Comments:	1	2	3	4	5
8. Instructors Name: Comments:	1	2	3	4	5
9. Instructors Name: Comments:	1	2	3	4	5
10. Instructors Name: Comments:	1	2	3	4	5
11. SCBA Staff Member: Comments:	1	2	3	4	5
12. SCBA Staff Member: Comments:	1	2	3	4	5

**Please return completed evaluation at the end of the seminar or mail or Fax to:  
 SCBA 37 Old Courthouse Square, Ste. 100, Santa Rosa, CA, 95404  
 Fax # 542-1195**

# SONOMA COUNTY BAR ASSOCIATION



## Mandatory Continuing Legal Education Evaluation Form

<b>Mandatory Continuing Legal Education</b> <b>Sponsor: SCBA and State Bar of CA Fee Arbitration Program</b> <b>Program: Fee Arbitration Program</b> <b>Date: September 20, 2007</b> <b>Time: 5:00 - 8:30 p.m.</b> <b>Place: 37 Old Courthouse Square, Suite 100</b> <b>Credit Units: 1 Unit Ethics 1.75 General</b>	P o o r	2	Good 3	4	E x c e l l e n t 5
1. To what extent were your personal objectives satisfied? Comments:	1	2	3	4	5
2. To what extent did the environment contribute to the learning experience? Comments:	1	2	3	4	5
3. To what extent did the written materials contribute to the learning experience? Comments:	1	2	3	4	5
4. To what extent were the objectives stated in the promotional literature or those stated at the beginning of the activity satisfied? Comments:	1	2	3	4	5
5. To what extent did the activity contain significant current intellectual or practical content? Comments:	1	2	3	4	5
6. Instructors Name: Comments: <i>Fish</i>	1	2	3	4	5
7. Instructors Name: Comments: <i>Sperber</i>	1	2	3	4	5
8. Instructors Name: Comments: <i>Mark</i>	1	2	3	4	5
9. Instructors Name: Comments:	1	2	3	4	5
10. Instructors Name: Comments:	1	2	3	4	5
11. SCBA Staff Member:	1	2	3	4	5
12. SCBA Staff Member:	1	2	3	4	5

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Provider Name \_\_\_\_\_  
 Provider Phone # \_\_\_\_\_  
 Provider Address \_\_\_\_\_  
 Title of Activity \_\_\_\_\_  
 Date of Offering \_\_\_\_\_ Site \_\_\_\_\_  
 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?  
 Comments: \_\_\_\_\_ 5 (4) 3 2 1

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

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

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

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

Please rate the faculty on the same scale.

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

# ACTIVITY EVALUATION FORM FOR CALIFORNIA MCLE

Please complete and return to Provider

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Provider Name \_\_\_\_\_  
 Provider Phone # \_\_\_\_\_  
 Provider Address \_\_\_\_\_  
 Title of Activity Mandatory Fee Arbitrator  
 Date of Offering 9/20/07 Site \_\_\_\_\_  
 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? (3) 4 3 2 1  
 Comments: \_\_\_\_\_

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

Please rate the faculty on the same scale.

	Overall Teaching Effectiveness	Effectiveness of Teaching Methods	Significant Current Intellectual or Practical Content
Instructor's Name: <u>everyone has great</u>	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: _____			

# ACTIVITY EVALUATION FORM FOR CALIFORNIA MCLE

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Provider Name \_\_\_\_\_  
 Provider Phone # \_\_\_\_\_  
 Provider Address \_\_\_\_\_  
 Title of Activity \_\_\_\_\_  
 Date of Offering \_\_\_\_\_ Site \_\_\_\_\_  
 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?  
 Comments: \_\_\_\_\_ 5 4 3 2 1

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

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

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

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

Please rate the faculty on the same scale.

	Overall Teaching Effectiveness	Effectiveness of Teaching Methods	Significant Current Intellectual or Practical Content
Instructor's Name: <u>Joel Maeh</u>	<u>(5)</u> 4 3 2 1	<u>(5)</u> 4 3 2 1	<u>(5)</u> 4 3 2 1
Subject/Topic: _____			
Comments: _____			
Instructor's Name: <u>Jill Spitzer</u>	<u>(5)</u> 4 3 2 1	<u>(5)</u> 4 3 2 1	<u>(5)</u> 4 3 2 1
Subject/Topic: _____			
Comments: _____			
Instructor's Name: <u>Michael Kyle</u>	<u>(5)</u> 4 3 2 1	<u>(5)</u> 4 3 2 1	<u>(5)</u> 4 3 2 1
Subject/Topic: _____			
Comments: _____			

# SONOMA COUNTY BAR ASSOCIATION



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	1	2	3	4	5	x
						c
						e
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						l
						e
						n
						t
1. To what extent were your personal objectives satisfied? Comments:	1	2	3	4	5	5
2. To what extent did the environment contribute to the learning experience? Comments:	1	2	3	4	5	
3. To what extent did the written materials contribute to the learning experience? Comments:	1	2	3	4	5	
4. To what extent were the objectives stated in the promotional literature or those stated at the beginning of the activity satisfied? Comments:	1	2	3	4	5	
5. To what extent did the activity contain significant current intellectual or practical content? Comments:	1	2	3	4	5	
6. Instructors Name: <i>JILL SPORBER</i> <i>MICHAEL FISH &amp; SOEL MARK</i> Comments:	1	2	3	4	5	
7. Instructors Name: Comments: <i>SPORBER / excellent</i>	1	2	3	4	5	
8. Instructors Name: Comments: <i>FISH / excellent</i>	1	2	3	4	5	
9. Instructors Name: Comments: <i>MARK Very good</i>	1	2	3	4	5	
10. Instructors Name: Comments:	1	2	3	4	5	
11. SCBA Staff Member: <i>PATTI (SONOMA COUNTY</i> <i>BAR ASSN</i>	1	2	3	4	5	
12. SCBA Staff Member:	1	2	3	4	5	

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 Fax # 542-1195**

# SONOMA COUNTY BAR ASSOCIATION

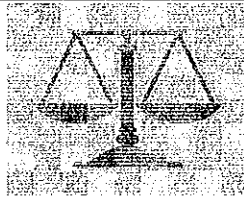


## Mandatory Continuing Legal Education Evaluation Form

Mandatory Continuing Legal Education Sponsor: SCBA and State Bar of CA Fee Arbitration Program Program: Fee Arbitration Program Date: September 20, 2007 Time: 5:00 - 8:30 p.m. Place: 37 Old Courthouse Square, Suite 100 Credit Units: 1 Unit Ethics 1.75 General	P o o r	Good			E x c e l l e n t
1. To what extent were your personal objectives satisfied? Comments:	1	2	3	4	5
2. To what extent did the environment contribute to the learning experience? Comments:	1	2	3	4	5
3. To what extent did the written materials contribute to the learning experience? Comments:	1	2	3	4	5
4. To what extent were the objectives stated in the promotional literature or those stated at the beginning of the activity satisfied? Comments:	1	2	3	4	5
5. To what extent did the activity contain significant current Intellectual or practical content? Comments:	1	2	3	4	5
6. Instructors Name: <i>Joel Mark</i> Comments:	1	2	3	4	5
7. Instructors Name: <i>Jill Sperber</i> Comments:	1	2	3	4	5
8. Instructors Name: <i>Michael Fish</i> Comments:	1	2	3	4	5
9. Instructors Name: Comments:	1	2	3	4	5
10. Instructors Name: Comments:	1	2	3	4	5
11. SCBA Staff Member: <i>Patti Tate</i>	1	2	3	4	5
12. SCBA Staff Member:	1	2	3	4	5

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## Mandatory Continuing Legal Education Evaluation Form

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1. To what extent were your personal objectives satisfied? Comments:	1	2	3	4	5
2. To what extent did the environment contribute to the learning experience? Comments:	1	2	3	4	5
3. To what extent did the written materials contribute to the learning experience? Comments:	1	2	3	4	5
4. To what extent were the objectives stated in the promotional literature or those stated at the beginning of the activity satisfied? Comments:	1	2	3	4	5
5. To what extent did the activity contain significant current intellectual or practical content? Comments:	1	2	3	4	5
6. Instructors Name: Comments:	1	2	3	4	5
7. Instructors Name: Comments:	1	2	3	4	5
8. Instructors Name: Comments:	1	2	3	4	5
9. Instructors Name: Comments:	1	2	3	4	5
10. Instructors Name: Comments:	1	2	3	4	5
11. SCBA Staff Member: Comments:	1	2	3	4	5
12. SCBA Staff Member: Comments:	1	2	3	4	5

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Fax # 542-1195**

# SONOMA COUNTY BAR ASSOCIATION



## Mandatory Continuing Legal Education Evaluation Form

Mandatory Continuing Legal Education Sponsor: SCBA and State Bar of CA Fee Arbitration Program Program: Fee Arbitration Program Date: September 20, 2007 Time: 5:00 - 8:30 p.m. Place: 37 Old Courthouse Square, Suite 100 Credit Units: 1 Unit Ethics 1.75 General	P o o r	Good			E x c e l l e n t
1. To what extent were your personal objectives satisfied? Comments:	1	2	3	4	5
2. To what extent did the environment contribute to the learning experience? Comments:	1	2	3	4	5
3. To what extent did the written materials contribute to the learning experience? Comments:	1	2	3	4	5
4. To what extent were the objectives stated in the promotional literature or those stated at the beginning of the activity satisfied? Comments:	1	2	3	4	5
5. To what extent did the activity contain significant current intellectual or practical content? Comments:	1	2	3	4	5
6. Instructors Name: Comments: <i>JOEL Great</i>	1	2	3	4	5
7. Instructors Name: Comments: <i>JILL Excellent</i>	1	2	3	4	5
8. Instructors Name: Comments: <i>MICHAEL SUPERB</i>	1	2	3	4	5
9. Instructors Name: Comments:	1	2	3	4	5
10. Instructors Name: Comments:	1	2	3	4	5
11. SCBA Staff Member: <i>PATTY</i>	1	2	3	4	5
12. SCBA Staff Member:	1	2	3	4	5

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Fax # 542-1195**

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Provider Name \_\_\_\_\_  
 Provider Phone # \_\_\_\_\_  
 Provider Address \_\_\_\_\_  
 Title of Activity \_\_\_\_\_  
 Date of Offering \_\_\_\_\_ Site \_\_\_\_\_  
 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?

Comments: \_\_\_\_\_ 5 4 3 2 1

To what extent did the environment contribute to the learning experience?

Comments: \_\_\_\_\_ 5 4 3 2 1

To what extent did the written materials contribute to the learning experience?

Comments: \_\_\_\_\_ 5 4 3 2 1

To what extent were the objectives stated in the promotional literature or those stated at the beginning of the activity satisfied?

Comments: \_\_\_\_\_ 5 4 3 2 1

To what extent did the activity contain significant current intellectual or practical content?

Comments: \_\_\_\_\_ 5 4 3 2 1

Please rate the faculty on the same scale.

*The materials were very well organized & presented*

	Overall Teaching Effectiveness	Effectiveness of Teaching Methods	Significant Current Intellectual or Practical Content
Instructor's Name: <u>Joel Mark</u>	<u>4</u> 4 3 2 1	<u>4</u> 4 3 2 1	<u>4</u> 4 3 2 1
Subject/Topic: _____			
Comments: _____			
Instructor's Name: <u>Jill Sparker</u>	<u>4</u> 4 3 2 1	<u>4</u> 4 3 2 1	<u>4</u> 4 3 2 1
Subject/Topic: _____			
Comments: _____			
Instructor's Name: <u>Michael Fitt</u>	<u>4</u> 4 3 2 1	<u>4</u> 4 3 2 1	<u>4</u> 4 3 2 1
Subject/Topic: _____			
Comments: _____			

*Thank you!*

# ACTIVITY EVALUATION FORM FOR CALIFORNIA MCLE

Please complete and return to Provider STATE BAR of CALIF. MAND. FEE ARB. TRAINING REPORT Please Print

Provider Name MARILYN DEWITT SCHULDT  
 Provider Phone # 707 963-1748  
 Provider Address 1299 VICTORIA LN. ST. HELENA, CA 94574  
 Title of Activity \_\_\_\_\_  
 Date of Offering SEPTEMBER 20, 2007 Site 37 OLD COURTHS. SQ. #100  
 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?  
 Comments: \_\_\_\_\_ (5) 4 3 2 1

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

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

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

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

Please rate the faculty on the same scale.

	Overall Teaching Effectiveness	Effectiveness of Teaching Methods	Significant Current Intellectual or Practical Content
Instructor's Name: <u>Jocel Mark</u> Subject/Topic: _____ Comments: _____	(5) 4 3 2 1	(5) 4 3 2 1	(5) 4 3 2 1
Instructor's Name: <u>Jill Spier</u> Subject/Topic: _____ Comments: _____	(5) 4 3 2 1	(5) 4 3 2 1	(2) 4 3 2 1
Instructor's Name: <u>Michael Fish</u> Subject/Topic: _____ Comments: _____	(5) 4 3 2 1	(5) 4 3 2 1	(5) 4 3 2 1

I thought this was an excellent presentation and training — very precise and clear —  
 My one suggestion is after the skits were talked about I would like to see a good example of an arbitration role-played

# ACTIVITY EVALUATION FORM FOR CALIFORNIA MCLE

Please complete and return to Provider

Please Print

Provider Name Sonoma County Bar  
 Provider Phone # \_\_\_\_\_  
 Provider Address State Bar Mandatory Fee Arbitration Committee  
 Title of Activity MFA training  
 Date of Offering 9-20-07 Site \_\_\_\_\_  
 Name of Participant LISA GYGAX  
 (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?

Comments: Completely (4) 4 3 2 1

To what extent did the environment contribute to the learning experience?

Comments: Good food, good set up (4) 4 3 2 1

To what extent did the written materials contribute to the learning experience?

Comments: The outline is all we used in class 5 (4) 3 2 1

To what extent were the objectives stated in the promotional literature or those stated at the beginning of the activity satisfied?

Comments: I really didn't say too much 5 4 (3) 2 1

To what extent did the activity contain significant current intellectual or practical content?

Comments: The best class here yet. Too short need to cover more in detail. (4) 4 3 2 1

Please rate the faculty on the same scale.

	Overall Teaching Effectiveness	Effectiveness of Teaching Methods	Significant Current Intellectual or Practical Content
Instructor's Name: <u>Michael Fish</u>	(5) 4 3 2 1	(4) 4 3 2 1	(4) 4 3 2 1
Subject/Topic: <u>Intro, Hearings, bias, conflicts, location, Agreements</u>			
Comments: <u>Very good, need to stop interrupting his cohorts.</u>			
Instructor's Name: <u>Jill Sperber</u>	(5) 4 3 2 1	(4) 4 3 2 1	(4) 4 3 2 1
Subject/Topic: <u>Forum, Waiver, process, billing, Oaths, Malpractice, Awards</u>			
Comments: <u>Very good</u>			
Instructor's Name: <u>Joel Mark</u>	(5) 4 3 2 1	(4) 4 3 2 1	(5) 4 3 2 1
Subject/Topic: <u>Fee, Statutes of Limitation, jurisdiction, preparation, evidence</u>			
Comments: <u>He brings a lot to these Findings</u>			

# ACTIVITY EVALUATION FORM FOR CALIFORNIA MCLE

Please complete and return to Provider

Please Print

Provider Name 35 Bar CA.  
 Provider Phone # \_\_\_\_\_  
 Provider Address \_\_\_\_\_  
 Title of Activity MANDATORY Fee Arbitration  
 Date of Offering 9/20/07 Site Sonoma County Bar Assoc  
 Name of Participant Michael Lynett  
 (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?  
 Comments: \_\_\_\_\_ 5 4 3 2 1

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

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

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

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

Please rate the faculty on the same scale.

	Overall Teaching Effectiveness	Effectiveness of Teaching Methods	Significant Current Intellectual or Practical Content
Instructor's Name: <u>Joel Mark</u> Subject/Topic: <u>MFA</u> Comments: _____	5 <u>4</u> 3 2 1	5 <u>4</u> 3 2 1	<u>5</u> 4 3 2 1
Instructor's Name: <u>Jill Sperber</u> Subject/Topic: <u>MFA</u> Comments: _____	5 <u>4</u> 3 2 1	5 <u>4</u> 3 2 1	<u>5</u> 4 3 2 1
Instructor's Name: <u>Mike Fosh</u> Subject/Topic: <u>MFA</u> Comments: _____	5 <u>4</u> 3 2 1	5 <u>4</u> 3 2 1	<u>5</u> 4 3 2 1

# ACTIVITY EVALUATION FORM FOR CALIFORNIA MCLE

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Provider Name \_\_\_\_\_  
 Provider Phone # \_\_\_\_\_  
 Provider Address \_\_\_\_\_  
 Title of Activity Mandatory Fee Arbitration  
 Date of Offering 9/20/07 Site Santa Rosa  
 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?  
 Comments: \_\_\_\_\_ (5) 4 3 2 1

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

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

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

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

Please rate the faculty on the same scale.

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