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**Evaluator Checklist**

**We would like to gather feedback to use for planning future virtual events. Focus on experiences within your assigned cluster(s) by providing feedback to JA by using the form provided.**

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| **Your Name:** |
| **Cluster Name:** |
| **Company/Presenter Name:** |
| **Title of Experience:** |
| Did the experience focus on careers in demand/career pathways? |
| Was the material/content engaging? |
| Was the length of time appropriate for videos? (too long, too short, etc). |
| What did you like about the experience? |
| What are some improvements that could be made on this experience in the future? |
| If LIVE experience, did it start/end on time & stay on schedule? |
| If LIVE experience, were there any technical difficulties? |
| If LIVE experience, did the polls/Q&A chat work well? |

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| **Additional Comments:** |
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Please save with filename as cluster name and your name and assign a number 1, 2, 3, etc. and send all completed forms to Molly at molly@jaindy.org.

Example of file name: Advanced Manufacturing Molly 1 or Technology Cindy 2, etc.