

# Interprofessional Workshop

Date

## Student Evaluation Form

Please circle your school:    dental medicine    medicine    MN    BSN    social work

**Please respond to the following statements using a scale of 1 to 5. Circle the number that corresponds to your response.**

**1=strongly disagree, 2=disagree, 3=neutral, 4=agree, 5=strongly agree**

General Workshop Evaluation:	Strongly Disagree 1	2	3	4	Strongly Agree 5
1. Working with students from other professions was beneficial to my learning.					
2. I was comfortable working with students from other professions.					
3. The topic of (            ) was important for my profession to learn about.					

Macy Objectives	Strongly Disagree 1	2	3	4	Strongly Agree 5
1.This activity helped me develop a better understanding of teamwork					
2.This activity provided meaningful interdisciplinary work					
3.This activity provided me with a better appreciation for Inter-professional support for quality healthcare					
4. This activity has given me an opportunity to apply Inter-professional knowledge					

Please **circle** the number that best reflects to what extent you feel you have met the objectives listed below.

1=objective not met    3=mixed ( ½ met ½ not met)    5 = objective completely met

Specific Activity Objectives	Not Met		Mixed ½ & ½		Completely Met
	1	2	3	4	5
	1	2	3	4	5
	1	2	3	4	5

What is one thing you learned that you will take away from this activity?

What is one suggestion for improvement for future activities?

(IPE4 (wk#)\_(IPE4 Student Student quantitative eval tool\_ (date)