**In Collaboration with**

***The Alliance of Black Social Workers, Inc. Phila. Chapter of the National Association of Black Social Workers, Inc.***

CONTINUING EDUCATION PARTICIPANT SATISFACTION/EVALUATION FORM

PLEASE PRINT

Name/Degree:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City/State/Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Workshop: ***Microaggression and Discrimination***

Date/Location of Workshop: Zoom 3 CE Mbongi, Wednesday, May 26, 2021, 6 – 9 P.M. EST

Number of CE Credits: 3

Presenter(s}: **Celeste Malone, Ph.D., M.S.**

* I am a psychologist seeking CE credits to maintain my psychologist license.
* I am a non-psychologist.
* I am a certified counselor.
* I am a social worker.
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***PLEASE COMPLETE AND RETURN TO DVABPSIORG@GMAIL.COM.***

***Using the scale below, circle appropriate number after each statement to indicate the degree to which you agree or disagree with the statement.***

**[Strongly (-) DISAGREE] 1 2 3 4 5 [Strongly (+) AGREE]**

1. The workshop description was accurate. 1 2 3 4 5
2. I acquired new knowledge and/or skills. 1 2 3 4 5
3. The teaching format/length was suitable to the content. 1 2 3 4 5
4. The objectives of the course were met. 1 2 3 4 5
5. The participant/instructor interaction was sufficient. 1 2 3 4 5
6. Handouts and audiovisual aids were legible and helpful. 1 2 3 4 5
7. The presenter(s) were well prepared. 1 2 3 4 5
8. The concepts were well prepared. 1 2 3 4 5
9. The presenter(s) were responsive to questions. 1 2 3 4 5
10. The workshop staff was responsive and helpful. 1 2 3 4 5
11. The workshop facility was comfortable and adequate. 1 2 3 4 5
12. Enrollment was smooth and efficient. 1 2 3 4 5
13. I would recommend this workshop to others. 1 2 3 4 5
14. The presenter(s) have good presentation skills. 1 2 3 4 5

How much did you learn as a result of this CE program? (**1 being very little 5 being a great deal)**

1 2 3 4 5

Comments and recommendations for change if this workshop is presented again (e.g. length, handouts, format, etc.).

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Suggestions for future workshop topics:

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**LEARNING ASSESSMENT**

Please rate the following statements on the scale below (circle numbers 1-5).

Based on the content of this workshop, I am able to:

**Strongly DISAGREE (1)** **Strongly AGREE (5)**

1. Assess clinicians’ knowledge of microaggressions and their 1 2 3 4 5

impact on emotional health

1. Demonstrate appropriate ways to respond to microaggressions 1 2 3 4 5
2. Select strategies to support those who have experienced 1 2 3 4 5

microaggressions

1. Explain how microaggression may be related to trauma 1 2 3 4 5
2. Explain how ethnic minoritized groups are likely to experience 1 2 3 4 5

microaggressions**.**

How useful was the content of this CE program for your **Not Useful (1) Extremely Useful (5)**

practice or other professional development? 1 2 3 4 5