



Hands on Training Modules

Participant Evaluation Form

Candidate: WIRLA PONTES MUNHOZ Signature: [Signature]
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Module: 5 and 3 Training period: 07/11 - 08/08/07

Personal Course Objectives

- 1: APRECIAMENTO PROFISSIONAL
- 2: EMPREENHEIMENTO CIENTIFICO
- 3: SATISFAÇÃO PESSOAL

	Met	Not Met	Partially Met
1:	✓		
2:	✓		
3:	✓		

How much of the course content was new to you (please circle one):

Almost all

About 75%

About 50%

About 25%

Almost none

REPRODUCTIVE RESEARCH CENTER
(Hands on training)

Topics covered:

1. _____ 2. _____
 3. _____ 4. _____
 5. _____ 6. _____

Course Evaluation	Excellent (5)	Very Good (4)	Good (3)	Fair (2)	Poor (1)	N/A
Facility conducive to learning	✓					
Content of syllabus/handout material	✓					
Hands on experience	✓					
Multimedia presentations	✓					
Length of course to contents	✓					
Appropriate time for questions	✓					
Overall course management	✓					

What was the most effective aspect(s) of this course? and why?

EXCELENÇA DOS PROFESSORES QUE MINISTRARAM O CURSO; MATERIAL EM ABUNDÂNCIA, ATENÇÃO DE TODA A EQUIPE EM ESPECIAL A DRA. KELLY ATHYDE, CUMPRIMENTO DO CRONOGRAMA E PROGRAMA.

What was the least effective aspect(s) of this course? and why?

NADA A DECLARAR.

What could have made this course better?

COMO SUGESTÃO, POSSUIR 1 MICROSCÓPIO POR ALUNO, MAS ESTE FATOR NÃO PREJUDICOU A QUALIDADE E A EXCELENÇA DO CURSO.

Additional comments:

QUERO AGRADECER TODO O CARINHO E ATENÇÃO DE TODOS EM CLEVELAND CLINIC ANDROLOGY. MUITO OBRIGADA!