

Alpha Phi Alpha Fraternity, Inc. Southern Region Cannon-Dozier Project Participant Evaluation Form



Chapter Name _____

University/Location _____

Program Date _____

PLEASE RATE THE CHAPTER'S CANNON-DOZIER PROJECT IN THE FOLLOWING CATEGORIES

Your level of knowledge on:

	<i>[Not Knowledgeable (1)</i>	<i>Fairly Knowledgeable (2)</i>	<i>Knowledgeable (3)</i>	<i>Very Knowledgeable (4)]</i>
Overall alcohol related statistics prior to this program	1	2	3	4
Overall alcohol related statistics after this program	1	2	3	4
College student alcohol consumption prior to this program	1	2	3	4
College student alcohol consumption after this program	1	2	3	4
Legal parameters of alcohol consumption prior to this program	1	2	3	4
Legal parameters of alcohol consumption after this program	1	2	3	4
How alcohol effects the body prior to this program	1	2	3	4
How alcohol effects the body after this program	1	2	3	4
Alcoholism prior to this program	1	2	3	4
Alcoholism after this program	1	2	3	4

During the program:

	<i>[Disagree (1)</i>	<i>Somewhat Agree (2)</i>	<i>Agree (3)</i>	<i>Strongly Agree (4)]</i>
The presenters were knowledgeable on the topic	1	2	3	4
The information was presented in a way that was easy to understand	1	2	3	4
The presentation was engaging/interactive	1	2	3	4

Overall:

	<i>[Disagree (1)</i>	<i>Somewhat Agree (2)</i>	<i>Agree (3)</i>	<i>Strongly Agree (4)]</i>
The program was effective	1	2	3	4
I would recommend that others attend this program in the future	1	2	3	4
I would attend a similar program again in the future	1	2	3	4

What did you like most about this program?

What did you like least about this program?

How could this program be improved?

**Thank you for attending our program and for completing the evaluation.
Please be sure to submit your completed evaluation to an Alpha brother before leaving.**