Club Excellence Process Pro

Facilitator Evaluation of Workshop

Please complete the following evaluation concerning your CEP experience. Your honest assessment of the process will help ensure that facilitators are provided with the information they need to make CEP an effective and rewarding experience.

Facilitator name:	District:
Participating club(s):	
Date(s) of workshop:	

Workshop Preparation/The Facilitator Role

24-4	Strongly					Strongly
Statement	Disagree					— Agree
I received information well in advance of the workshop dates.	1	2	3	4	5	6
I understood the purpose of the workshop.	1	2	3	4	5	6
I understood my responsibilities as a facilitator.	1	2	3	4	5	6
The CEP Pro Facilitator Guide was clear and easy to follow.	1	2	3	4	5	6
I feel that I was adequately prepared to conduct the workshop.	1	2	3	4	5	6

Steps 1 - 4

Statement	Strongly Disagree				_	Strongly — Agree
The Steps were useful for participants.	1	2	3	4	5	6
The Steps were easily understood and materials were user-friendly.	1	2	3	4	5	6

Post-Workshop

Statement	Strongly Disagree				_	Strongly Agree
The club has a clear understanding of what it needs to do to achieve excellence.	1	2	3	4	5	6
The club has (or will be able to create) achievable goals for improvement.	1	2	3	4	5	6
The club has (or will be able to create) action plans to guide us toward goal achievement.	1	2	3	4	5	6
The club now recognizes the resources it can use to meet its goals.	1	2	3	4	5	6
I believe the club will follow the plans created and utilize the resources available to meet our goals.	1	2	3	4	5	6

Additional Comments		
Can LCI use your comments for the promotion of CEP?	Yes	□ No

Send completed report to:

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