Continuing Nursing Education (CNE) Program Evaluation
Summative

Program: Title of Program
Date: May 6, 2016

1. Was the following learning outcome met?

   Nurse Planners will have the tools necessary for their successful transition to ANCC’s new 2015 criteria for planning, delivering, and evaluating CNE activities.

   Yes___x32____ No ___x1____

2. The presenter(s) were knowledgeable and effective in presenting this content.

   Yes___x33____ No ___x0____

3. How likely are you to use any of the information learned today in your nursing practice? (please circle one)

   Very Likely x30    Likely x3    Somewhat Likely    Not Likely

4. What did you learn today that you intend to use in your practice as you strive to enhance your ability to provide care, educate, and/or lead others? (please be as specific as possible) ____________________________

   enter all anecdotal comments received for all questions asked.

5. What was your primary motivation for attending this event? (i.e. specific content/topic, networking, need for CNE, etc.) ____________________________

   enter all anecdotal comments received for all questions asked.

6. Other comments or suggestions for future programs:

   enter all anecdotal comments received for all questions asked.