THE LAW SOCIETY OF SINGAPORE

THE LAW SOCIETY OF SINGAPORE
FEEDBACK FORM

Thank you for attending this training event.
Please complete & leave this Feedback Form with us before you leave.
We value your feedback to help us improve.

EVENT TITLE: _____ **DATE:** _____
MODULE/SESSION TITLE: _____

Please complete this section in full

Are you a (Please Ö)	☐	**Law Society Member**	☐	**Law Society Associate Member**	☐	**Member of SCCA**	☐ **Non-Member**
LAW FIRM / LAW CORPORATION / COMPANY: (Please state)							
DESIGNATION (Law Society Members & Assoc. Members, Please tick) ☐ Sole Proprietor/Sole Practitioner ☐ Partner/Director ☐ Legal Assistant/Associate ☐ Others _____ Please specify					**DESIGNATION (Non Law Society Members)** _____ Please specify		
CATEGORY (Law Society Members only. Please circle.)	**Junior**				**Middle**		**Senior**

Please answer all questions by placing a Ö in the appropriate box.

EVENT ORGANISATION	**Excellent**	**Good**	**Fair**	**Poor**	**Very Poor**
	5	**4**	**3**	**2**	**1**
How did you find the convenience of the venue?					
How did you find the conference facilities/seminar room?					
How did you find the food & refreshments?					
Was this programme value-for-money?					
How did you find the event duration?					
Overall, how was our organisation of the event?					

CHAIRPERSON	**Strongly agree**	**Agree**	**No Opinion**	**Disagree**	**Strongly Disagree**
	5	**4**	**3**	**2**	**1**
Well-prepared.					
Clear.					
Exercised good time management.					
Facilitated the Q&A /discussion session well.					

SPEAKER / Workshop Leader: Name:_____	**Strongly agree**	**Agree**	**No Opinion**	**Disagree**	**Strongly Disagree**
	5	**4**	**3**	**2**	**1**
Well-prepared.					
Clear.					
Knowledgeable about the subject.					
Held my interest.					
Provided appropriate presentation/ course materials/ handouts.					

SPEAKER 2: Name:_____	**Strongly agree**	**Agree**	**No Opinion**	**Disagree**	**Strongly Disagree**
	5	**4**	**3**	**2**	**1**
Well-prepared.					
Clear.					
Knowledgeable about the subject.					
Held my interest.					
Provided appropriate presentation/ course materials/ handouts.					

Thank you for taking the time to complete this form.

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SPEAKER 3 **Name:**_____	**Strongly agree**	**Agree**	**No Opinion**	**Disagree**	**Strongly Disagree**
	5	**4**	**3**	**2**	**1**
Well-prepared.					
Clear.					
Knowledgeable about the subject.					
Held my interest.					
Provided appropriate presentation/ course materials/ handouts.					

SPEAKER 4 **Name:**_____	**Strongly agree**	**Agree**	**No Opinion**	**Disagree**	**Strongly Disagree**
	5	**4**	**3**	**2**	**1**
Well-prepared.					
Clear.					
Knowledgeable about the subject.					
Held my interest.					
Provided appropriate presentation/ course materials/ handouts.					

WORKSHOP EXERCISES/ACTIVITIES:	**Strongly agree**	**Agree**	**No Opinion**	**Disagree**	**Strongly Disagree**
	5	**4**	**3**	**2**	**1**
Were well-structured.					
Provided me with adequate opportunities for practice.					
Were well-facilitated.					
Helped me identify areas of improvement.					

YOUR OPINION	**Strongly agree**	**Agree**	**No Opinion**	**Disagree**	**Strongly Disagree**
	5	**4**	**3**	**2**	**1**
I learnt something valuable from this program.					
I feel that the learning objectives were met.					
I would recommend this program to my friends/colleagues.					

YOUR PREFERENCES

I prefer the Law Society conduct its training events on:

☐ Weekdays, office hours ☐ Weekdays, evenings ☐ Weekends

I heard about this event via:

☐ Fax broadcast ☐ E-jus news ☐ Law Society homepage ☐ Colleagues Others:_____

(please specify)

Thank you for taking the time to complete this form.

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I would like the Law Society to organise more training in the following area(s):
(You may select more than 1)

- Professional Practice/Areas of Law ☐ Please specify: _____
- Practice Management ☐ Please specify: _____
- General Business & Management ☐ Please specify: _____
- Personal Development ☐ Please specify: _____
- Others: _____ (please specify)

In what ways can we improve? Please let us know by writing in the space below.

Please write your suggestions for other training events/programs or publications in the box below.

Thank you for taking the time to complete this form.