Planning and Evaluation of Educational Events

**Educational event planning**

***Name of the event:***

***Objective(s) of the event:***

***Agreed target indicator(s) (success criterion/criteria) of the event:***

**Name and signature of the employee:**

**Name and signature of the immediate superior:**

**Evaluation of the event immediately after participation**

**Content Lecturer**

|  |  |  |
| --- | --- | --- |
| Excellent   Good   Satisfactory   Unsatisfactory  |  | Excellent   Good   Satisfactory   Unsatisfactory  |

**Which pieces of knowledge from the event can you use in your job?**

Date:

**Evaluation of the event after 1 month**

**The target indicator(s) was (were) achieved** 

**The target indicator(s) was (were) not achieved due to**

**- the event´s inappropriate (non-corresponding) focus** 

|  |  |
| --- | --- |
| Please explain: |  |

 **- a failure to apply new pieces of knowledge in practice** 

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| --- |
| Please explain: |

- **an impossibility of applying new pieces of knowledge in practice** 

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| --- |
| Please explain: |

Where can you see the event´s main benefit(s) for your job?

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How (In what areas of his/her job) has the employee improved? (as described by the employee´s immediate superior):

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Date: