**Guest Speaker Evaluation Form** (WBL coordinator to pre-fill own name and contact information)

Thank you for taking the time to speak to (name of class and school) on (date). Your participation helps students make better-informed decisions regarding their future careers. Your feedback is valuable to ensuring high quality experiences for future speakers and our students. Please take a few minutes to complete this form and return it to (whom and where) at your earliest convenience.

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| --- | --- |
| Your name: | Phone number: |
| Title: | Email: |
| Organization: | Industry: |
| Work-based learning coordinator name and contact information: | |

Please evaluate the guest speaker event in each of the following areas.

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| LOGISTICS | | | | |
| Communication about the presentation and expectations | Exceeded Expectations | Met Expectations | Below Expectations | Not Applicable |
| Ease of participation | Exceeded Expectations | Met Expectations | Below Expectations | Not Applicable |
| Overall coordination | Exceeded Expectations | Met Expectations | Below Expectations | Not Applicable |
| STUDENTS | | | | |
| Students were prepared with questions | Exceeded Expectations | Met Expectations | Below Expectations | Not Applicable |
| Students behaved appropriately | Exceeded Expectations | Met Expectations | Below Expectations | Not Applicable |
| OVERALL EVALUATION | | | | |
| Guest speaker experience | Exceeded Expectations | Met Expectations | Below Expectations | Not Applicable |

Would you be willing to be a guest speaker again in the future? YES NO

Would you be willing to participate in other work-based learning activities, such as workplace tours, career fairs, informational interviews, job shadows, or internships? Please note any that are of interest in the comment section below. Someone will contact you to follow up.

Please use the space below to provide additional comments about your experience. Please make note of any ways the coordinator could have helped you be better prepared.

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