

**Take a moment and help us, please!**  
You recently attended one our leadership conferences. In order to assess our conference content and leader skills, we ask you to provide the following information.

## **Sunday School Evaluation Form**

Date of Conference Attended: \_\_\_\_\_ Location: \_\_\_\_\_  
Age Group/Title of Conference: \_\_\_\_\_

**Please rate the following, 1 being low and 5 being high.**

**Content. Was it practical and clear?**

**1      2      3      4      5**

**Conference Leader. Communicate effectively?**

**1      2      3      4      5**

**Conference Leader. Well prepared?**

**1      2      3      4      5**

**How would you rate this conference overall?**

**1      2      3      4      5**

**Will the information from the conference be helpful to you in your situation as your church continues to work through the Sunday School Training?**

**Yes**

**No**

**Comments/Suggestions:**

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<b>Name:</b>	<b>Phone or Email address:</b>
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Note: Although your name is optional, providing it will allow us to respond, if needed.

**Thank you for assisting in our evaluation!**

Mail to: Sunday School Department, P O Box 530, Jackson MS 39205  
or fax: 601-714-7430