



ADS Exhibition Clinic III Evaluation

Name _____ Registration # _____

Please list the year that you last exhibited in a show _____

Please help the ADS evaluate the effectiveness of this clinic by completing the following questionnaire.

Rate your overall satisfaction with all aspects of the clinic: content (covering changes, updates, new materials), responsibilities and duties of judges, and show procedures.

Circle One:

Excellent Good Average Below Average N/A or No Opinion

Rate how well the clinic provided you a review of ADS policy, touched on practical aspects of exhibition judging, and prepared you personally for your continued judging duties.

Excellent Good Average Below Average N/A or No Opinion

Rate the overall effectiveness of your instructors. Please consider knowledge of the subject, quality of delivery, use of daylilies or props, use of class time and discussions.

Excellent Good Average Below Average N/A or No Opinion

Please provide comments on how this clinic might be improved: _____
