

CONFERENCE, TRAINING OR WORKSHOP EVALUATION

1. Identification of the person	
Last name	First name
School / Service / Center	Category of employment

2. Conference or workshop	
Title :	
Subjet :	
Person responsible :	
Date :	Location :

3. Conference or workshop summary (provide a summary of the conference or workshop).

4. General comments
Strong points :
Weaknesses :

Send to the following email address: formation@cssdulittoral.gouv.qc.ca