



2020 NASPA GENERAL ASSEMBLY Virtual | November 4-7, 2020



CONTACT HOUR MONITORING FORM FOR CHES

Name:	
) #:
	ddress:
Phone	Number:
	Address:
City/St	ate/Zip Code:
Program S	Session Information:
Date:	
Time:	
	Name:
	ere the learning objectives met? (Please evaluate each objective on the scale below)
	2 = Not very well met 3 = Somewhat met 4 = Well met 5 = Very well met
	ize varying sources and types of data to drive the conversations, collaborations, and priorities or campus
	ntify specific collaborations critical for broadening responsibility for health, prevention, and ess initiatives
	erpret population specific data and peer-reviewed literature to guide their health promotion, ention, and wellness departments
	vide examples of campuses using evidence-based (informed) practice as a cornerstone of their ary prevention programs
	oly standards in service evaluation, strategic planning, resource allocation, and program

= Very Poor	2 = Poor	3 = Fair		4 = Good	5 = Ex	cellent	
Speakers	Knowledge of Subject Matter	Organization/ Clarity of Presentation	Useful Information	Speaker/ Participant Interaction	Use of Allotted Time	Audio/ Visual Aids	Handou
ease rate the o	verall quality o				5 = Ex	cellent	
· · · · · · · · · · · · · · · · · · ·				= Good 5 = Excellent			
Comments:							

• Articulate the paradigms, opportunities and challenges inherent with both student development and

4 = Well met

5 = Very well met

public health professionals on staff

Please rate the degree to which the session met your learning needs:

1 = Not met 2 = Not very well met 3 = Somewhat met