

# CFP BOARD

## Continuing Education Program Evaluation

### SECTION I: Instructions

As part of a multi-year continuing education quality assurance initiative, CFP Board is seeking feedback on CFP Board accepted CE programs. Once complete, you may submit this form to CFP Board via email or fax:

Email: [CEcomments@cfpboard.org](mailto:CEcomments@cfpboard.org)  
Fax: 202-379-2299

### SECTION II: Contact and CE Program Information

Your Name:	Your CFP Board ID # (if applicable):
Your Email:	Your Phone #:
CE Sponsor Name:	CE Sponsor ID (if known):
CE Program Name:	CE Program ID (if known):
Number of CE Hours:	Program Delivery Format:      Live      Self - Study

Please rate your experience in the following areas:

<b>Learning Objectives Were Met:</b> Lowest    1    2    3    4    5    Highest	<b>Level of Complexity Accurately Reflected Course Content :</b> Lowest    1    2    3    4    5    Highest
<b>Instructor Knowledgeable of Topic (live courses):</b> Lowest    1    2    3    4    5    Highest	<b>Self-Study Assessment (self-study courses):</b> Lowest    1    2    3    4    5    Highest
<b>Content Was Accurate and Relevant:</b> Lowest    1    2    3    4    5    Highest	<b>Overall Course Satisfaction:</b> Lowest    1    2    3    4    5    Highest

### SECTION III: Feedback

Please provide any additional relevant details. (Attach additional pages or documentation as needed.)

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### SECTION IV: Acknowledgement

I affirm that all statements and documentation supporting my feedback are true and accurate to the best of my knowledge.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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