



**SESSION EVALUATION**  
**RESTORATIVE JUSTICE**

Saturday, May 28, 2016 • 10:15 AM-11:45 AM • Washington, D.C.

**Provider:** National Association of Women Judges  
**Address:** 1001 Connecticut Avenue, NW, Suite 1138, Washington, D.C. 20036  
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*Directions: Please mark the appropriate box to indicate your evaluation of this course.*

- |   | YES | NO  |
|---|-----|-----|
| 1. Did this program meet your educational objectives?                         | { } | { } |
| Comments: _____   |     |     |
| 2. Did the environment have a positive influence on your learning experience? | { } | { } |
| Comments: _____   |     |     |
| 3. Were you provided with substantive written materials?                      | { } | { } |
| Comments: _____   |     |     |
| 4. Did the course update or keep you informed of your legal responsibilities? | { } | { } |
| Comments: _____   |     |     |
| 5. Did the activity contain significant current professional content?         | { } | { } |
| Comments: _____   |     |     |

*Please rate the speaker on a scale of 1 to 5 (1 being the lowest; 5 being the highest).*

	Overall Teaching Effectiveness	Effectiveness of Teaching Methods	Significant Current Knowledge of Subject
Name: <b>Carolyn Henwood</b>	5 4 3 2 1	5 4 3 2 1	5 4 3 2 1
Subject/Topic/Comments: _____			
Name: <b>Nawal Al-Jawhari</b>	5 4 3 2 1	5 4 3 2 1	5 4 3 2 1
Subject/Topic/Comments: _____			
Name: <b>Kimberly Craven</b>	5 4 3 2 1	5 4 3 2 1	5 4 3 2 1
Subject/Topic/Comments: _____			
Name: <b>Lunel Junco Gabayoyo</b>	5 4 3 2 1	5 4 3 2 1	5 4 3 2 1
Subject/Topic/Comments: _____			
Name: <b>Naurin Aktar Kankon</b>	5 4 3 2 1	5 4 3 2 1	5 4 3 2 1
Subject/Topic/Comments: _____			

Name of Participant (optional): \_\_\_\_\_