

**Continuing Education (CE) for Licensed Clinical Social Worker**

**Training Evaluation & Credit Claim Form**

Psychiatry Faculty Practice

Please complete this evaluation and submit to obtain your Certificate of Completion

Training Date: \_\_\_\_\_

Training Topic: \_\_\_\_\_

Instructor/Presenter: \_\_\_\_\_

**Participant Information:**

Name: \_\_\_\_\_ License #: \_\_\_\_\_ Please select one: PhD  PsyD  Other \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email Address (Certificate of Completion will be sent to this email): \_\_\_\_\_

Did the training meet the stated goals and objectives? How would you rate the following?:	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1. The instructor was knowledgeable about subject matter					
2. The instructor was able to effectively communicate ideas and content					
3. The instructor was prepared and organized					
4. The instructor responded well to participants needs and questions					
5. The instructor provided a comprehensive overview of the topic area					
6. The instructor provided a comprehensive scope of current research related to the topic area					
7. The instructor helped to increase my understanding of the topic area					
8. The learning objective 1 was comprehensively covered during the Presentation*					
9. The learning objective 2 was comprehensively covered during the Presentation*					
10. The learning objective 3 was comprehensively covered during the Presentation*					
11. Your overall rating of the instructor's effectiveness					
12. Your overall rating of the training location and facilities					
13. I would recommend this training to others in the field					
14. I found this training helpful to my professional work as a Licensed Clinical Social Worker					

Comments and any future training topics that would benefit you:

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For NYS Licensed Social Worker to claim CE credits, please return the completed evaluation via email to:

Pamela Le at: [lep@upstate.edu](mailto:lep@upstate.edu)

\*\*Specific learning objectives for each presentation are available at: <https://www.upstate.edu/psych/education/grandrounds-calendar.php>

\*\*Certificate of Completion will be sent electronically to the participant's email address noted on this form within 6-8 weeks\*\*