ACTIVITY EVALUATION FORM FOR CALIFORNIA MCLE

Please complete and return to Provider (Please Print)						
Provider Name: Los Angeles (Copyrig	ıht Soci	ety	
Provider Number: 2065						
Title of Activity: The Copyrigh			nt Claims Board: A Progress Report			
Presenter: David O. Cars			son			
Date(s) of Activity:	Date(s) of Activity: February 14,					
Time of Activity:	1:00PM -	0PM				
Location of Activity:	y: Virtual – Via Z		Zoom			
Please indicate your evaluation of this course by completing the table below:						
QUESTION			Yes	No	COMMENTS	
Did this program meet your educational objectives?						
Were you provided with substantive written materials?						
Did the course update or keep you informed of your legal responsibilities?						
Did the activity contain significant professional content?						
Was the environment suitable for learning (e.g., temperature, noise, lighting, etc.)?						
Please rate the instructor(s) of the course below:						
			n a scale of 1 to 5, with 1 being Poor and being Excellent, please rate the items below			Rate 1-5
		0	verall T	eaching	g Effectiveness	
Kn			nowledge of Subject Matter			
					to 5, with 1 being Poor and nt, please rate the items below	Rate 1-5
Ov			verall Teaching Effectiveness			
Kn				nowledge of Subject Matter		
On a scale of 1 to 5, with 1 being Poor and 5 being Excellent, please rate the items below						Rate 1-5
Overall Teaching Effectiveness						
Knowledge of Subject Matter					ubject Matter	