

**ALABAMA DEPARTMENT OF PUBLIC HEALTH  
Bureau of Professional and Support Services  
Satellite or Web Program Evaluation**

Sleep Disorders  
ASNA Activity Number: 5-91.625  
Contact hours for this program not available after: 09/30/2012

Date Viewed: \_\_\_\_\_

ADPH employees should return the completed evaluation and sign in sheet to their Site Facilitator. Persons not employed by ADPH should mail the completed evaluation and sign-in sheet within 3 working days to: Bureau of Professional and Support Services, Alabama Department of Public Health, P.O. Box 303017, Montgomery, AL, 36130-3017. **FAXES ARE NOT ACCEPTED.** Please allow 4-6 weeks for certificates to be mailed.

**Complete this section if you are viewing this program outside of an Alabama Department of Public Health site via satellite broadcast so that your CE Certificate can be mailed to you.**

Participant Name: \_\_\_\_\_

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

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

I attest that I viewed the entire program (signature of participant): \_\_\_\_\_

**All participants should complete the following:**

Discipline (circle): RN/CRNP LPN SW Other \_\_\_\_\_

Shade in the circle under the number you think best evaluates this educational offering using the following scale: 5=very useful; 4=useful; 3=average; 2=not useful; or 1=unacceptable

<b>Teaching Effectiveness of Presenter(s):</b>	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>
Tiras Jackson, RPSGT	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

<b>Course Content Objectives Met:</b>	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>
Tiras Jackson, RPSGT	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

List one thing you will do differently as a result of this training:

Other educational programs you would be interested in viewing: