

Evaluation Form

Please circle the appropriate number in response to the following questions.

	<u>Strongly Disagree</u>	<u>Disagree</u>	<u>Agree</u>	<u>Strongly Agree</u>
1. This performance enhancement intervention/ presentation was helpful.	1	2	3	4
2. I can use what I learned in this intervention/ presentation to improve my performance.	1	2	3	4
3. I would recommend performance enhancement interventions/presentations to other student-athletes.	1	2	3	4
4. I would like to further discuss methods of performance enhancement with a Sport Consultant.	1	2	3	4
5. I believe a Sport Consultant can help me improve my performance as a student-athlete.	1	2	3	4
6. I believe working with a Sport Consultant can help me reach and/or surpass my current expectations.	1	2	3	4
7. I believe working with a Sport Consultant can help our team reach and/or surpass our current expectations.	1	2	3	4

Please write a brief response to the following questions.

8. How was this intervention/presentation helpful?

9. What would you recommend to improve future performance enhancement interventions/presentations?

10. How effective was this intervention/presentation?

11. What future interventions/presentations would you attend (What would be helpful to you)?

12. When would you attend a future intervention/presentation (e.g., before/during season; before/after practice)?
