



## ACTIVITY EVALUATION FORM FOR CALIFORNIA MCLE

*Please complete and return to the California Minority Counsel Program (Please Print)*

Provider Name:	California Minority Counsel Program	Provider Number:	9949
Provider Address:	465 California Street, Suite 635, San Francisco, CA 94104		
Provider Phone #:	(415) 782-8990		
Title of Activity:	The Case of the Missing Black Associates: CMCP Minority Associate Retention Project – Pilot 1		
Date(s) of Activity:	Wednesday, February 13, 2019		
Time of Activity:	6:15 pm - 7:30 pm		
Location of Activity:	The Orrick Building, 405 Howard Street, San Francisco, CA 94105		

*Please mark the appropriate box to indicate your evaluation of this course:*

	YES	NO
1. Did this program meet your educational objectives? Comments: _____	<input type="checkbox"/>	<input type="checkbox"/>
2. Were you provided with substantive written materials? * <i>available online</i> Comments: _____	<input type="checkbox"/>	<input type="checkbox"/>
3. Did the course update or keep you informed of your legal responsibilities? Comments: _____	<input type="checkbox"/>	<input type="checkbox"/>
4. Did the activity contain significant current professional content? Comments: _____	<input type="checkbox"/>	<input type="checkbox"/>
5. Was the environment suitable for learning (e.g., temperature, noise, lighting, etc.)? Comments: _____	<input type="checkbox"/>	<input type="checkbox"/>

\* MCLE Written Materials are available online at [www.cmcp.org/mcle](http://www.cmcp.org/mcle)

***Please rate the instructor(s) on a scale of 1 to 5 (with 1 being Poor and 5 being Excellent):***

	Overall Teaching Effectiveness					Knowledge of Subject Matter				
Instructor's Name: <b>Robert White</b>	1	2	3	4	5	1	2	3	4	5
Subject Taught: Recognition & Elimination of Bias Lead Facilitator										
Comments:										

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