

INTRODUCTION TO SOMATIC EXPERIENCING® EVALUATION

LOCATION: _____

DATE: _____

PRESENTER: _____

COORDINATOR: _____

YOUR NAME: _____

ADDRESS: _____

EMAIL: _____

1. Which elements of the Introduction to SE® were of particular value to you professionally? Please be specific in your answer.

2. Please list any concepts presented during the Introduction to SE® that were difficult for you.

3. Were there any concepts presented in the Introduction to SE® that you feel were inadequately explained, or suggestions you may have that would facilitate a clearer presentation of any concept? Please be as specific as possible.

4. Using a scale of 1 (poor) to 10 (outstanding), please rate the **presenter** in the following areas:

a. Ability to create a safe container for the class: _____

b. Sensitivity to the needs of the class / individuals: _____

c. Knowledge of Somatic Experiencing®: _____

d. Ability to allow enough time to process SE course material: _____

e. Professional manner and courtesy to others: _____

6. Please share a few comments or questions regarding the format, presenter, or any other aspect of this Introduction to SE®. Use the back of this paper, if necessary.