

The Association for Psychoanalytic Medicine

<http://www.theAPM.org>

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Evaluation Form

RAPS

name of RAPS group:

academic year:

Chair(s):

How did the seminar contribute to your development?

What changes would you like us to make?

Would you attend next year?

rate (lowest) 1 2 3 4 5 (highest)

educational objectives were met	
activity added to my knowledge/competence	
activity will alter my patient care/performance	
activity was relevant to affect treatment outcome	
overall quality	
organization	
schedule of meetings	

(to be filled out by each member of group)

revised 12/2008