

COURSE EVALUATION

Course Title **Ethics in the Practice of Professional Engineering**

Date of Course _____ Presenter: **Vincent P. Drnevich, P.E., Ph.D.**

Evaluation of the Course

Did the content of the course meet your expectations?.....	Y	N
Did the promotional materials fairly represent what was presented?.....	Y	N
Was the Presenter knowledgeable on the subject?.....	Y	N
Was the material covered in sufficient depth?.....	Y	N
Was the Presenter organized, on time, and professional?.....	Y	N
Would you recommend this course to another professional?.....	Y	N

Suggestions for improving the **delivery methods** of the materials of this course: _____

List topics associated with Indiana Statutes and Rules for Professional Engineering Licensure
that you would like to see in future versions of this course: _____

Name (printed): _____; Signature _____

Send to: **Indiana Society of Professional Engineers
Ethics Course Evaluation
P. O. Box 20806,
Indianapolis, IN 46220**

Or send by e-mail to: **indspe@gmail.com**