



PDH EVALUATION FORM

IEEE 2017 International Symposium on EMC and Signal & Power Integrity

Washington, D.C.
7-11 August 2017

Complete a separate evaluation form for **each** time period, morning or afternoon, that credit is desired. Qualified Activities may include Papers, Workshops, Tutorials, Experiments & Demonstrations, Global University, and Technical Committee Meetings.

Date of Session/Activity: _____ **Morning or Afternoon:** _____

Record title of the Session/Activity attended and the time spent. If you attended papers from different sessions, list each of the technical activities (partial sessions or individual papers), Workshops, Tutorials, Experiments & Demonstrations, Technical Committee meetings, and Global University classes that you wish to have considered. Include the time spent at each.

Activity A Title: _____ **Hrs:min.** _____

Activity B Title: _____ **Hrs:min.** _____

Activity C Title: _____ **Hrs:min.** _____

Activity D Title: _____ **Hrs:min.** _____

Please indicate the extent to which you disagree or agree with the following statements. Use A, B, C, D to refer to each Activity.

	Strongly Disagree 1	2	3	4	5	Strongly Agree 6
A. The presented material was organized clearly and logically.						
B. The stated objectives of the presented material were satisfied.						
C. The technical content was appropriate.						
D. My knowledge on the topic increased to a level that made attendance worthwhile.						
E. The presenters were clear and easy to understand.						
F. The presenters clearly explained difficult concepts.						

The following assessment must be completed in order to qualify for PDH Credit.

Briefly summarize in a few sentences your description of the technical quality of this session.



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Which speaker(s) did you find most engaging and informative?

What two topics from this session did you find most helpful to your job and why?

On which topic(s) would you like to see additional information?

May we follow up with you regarding how this symposium impacted your work and career? (circle) **YES** **NO**

Please complete the following information to ensure your receipt of your certificate(s):

Your Name (as you would like it to appear on your certificate): _____

IEEE member number: _____ Are you a member of EMC Society? _____

Company Name: _____

Mailing Address _____

City _____ State/Province _____ Zip/Postal Code _____ Country _____

Phone _____ E-Mail _____

P.E. License Number and State _____

(Mandatory if licensed in the state of Florida and PDH credit is requested)

Submit completed form to: EMCS.pdhcop@yahoo.com, no later than Friday, 18 August 2017.