

Student Evaluation
Post-assessment

Name : _____ Grade: _____ Date: _____

Program name: _____

Insert the same true/false or "selection" test questions that were used in the pre-test.

INSTRUCTIONS: How would you rate this program? Please circle the number corresponding to your answer.

	Strongly Disagree 1	Disagree 2	Neither Agree nor Disagree 3	Agree 4	Strongly Agree 5
1. This program met my needs.	1	2	3	4	5
<i>Comments:</i>					
2. I found the activities/presentations/internship interesting.	1	2	3	4	5
<i>Comments:</i>					
3. I learned a lot about health care professions.	1	2	3	4	5
<i>Comments:</i>					
4. I learned about different health topics.	1	2	3	4	5
<i>Comments:</i>					
5. The activities/ presentations/ internship are helpful to someone thinking about working in the health care field.	1	2	3	4	5
<i>Comments:</i>					
6. After this experience, I am more interested in working in health care.	1	2	3	4	5
<i>Comments:</i>					
7. After this experience, I am more interested in working in the field(s) I learned about in this program.	1	2	3	4	5
<i>Comments:</i>					
8. I would consider working at the facility where I attended this program someday.	1	2	3	4	5
<i>Comments:</i>					
9. I would recommend this program to others.	1	2	3	4	5
<i>Comments:</i>					

INSTRUCTIONS: Your opinions about this program are very important. Please answer the following questions about your experience.

10. What did you like about this program?
11. What did you dislike about this program?
12. What change(s) would you recommend for next year? (For example: time of year held, additional topics, types of activities, etc.)

13. How likely are you to pursue a career in Health Care?

Very Likely 5	Likely 4	Unsure 3	Unlikely 2	Very Unlikely 1
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14. What 5 careers could you see yourself doing in the future? Write 1, 2, 3, 4, or 5 in the box beside the name of the career to show your 1st choice, your 2nd choice, and so on. Please mark only 5 careers.

- | | | | |
|--------------------------|---|--------------------------|--|
| <input type="checkbox"/> | 1. Non-health career: _____ | <input type="checkbox"/> | 24. Optometrist/eye doctor |
| <input type="checkbox"/> | 2. Audiologist/hearing specialist | <input type="checkbox"/> | 25. Orthopedic surgeon |
| <input type="checkbox"/> | 3. Cardiovascular technologist | <input type="checkbox"/> | 26. Pharmacist |
| <input type="checkbox"/> | 4. Certified Nurse Assistant | <input type="checkbox"/> | 27. Pharmacologist |
| <input type="checkbox"/> | 5. Chiropractor | <input type="checkbox"/> | 28. Physical therapist |
| <input type="checkbox"/> | 6. Dental hygienist | <input type="checkbox"/> | 29. Physician (M.D. or D.O.) |
| <input type="checkbox"/> | 7. Dental laboratory technician | <input type="checkbox"/> | 30. Physician assistant |
| <input type="checkbox"/> | 8. Dentist | <input type="checkbox"/> | 31. Podiatrist |
| <input type="checkbox"/> | 9. Dermatologist | <input type="checkbox"/> | 32. Psychologist – mental health |
| <input type="checkbox"/> | 10. Dietitian | <input type="checkbox"/> | 33. Radiation therapist |
| <input type="checkbox"/> | 11. Emergency Medicine Technician (EMT)/Paramedic | <input type="checkbox"/> | 34. Radiology or ultrasound technologist |
| <input type="checkbox"/> | 12. Forensic scientist | <input type="checkbox"/> | 35. Registered Nurse |
| <input type="checkbox"/> | 13. Geriatric specialist | <input type="checkbox"/> | 36. Social worker |
| <input type="checkbox"/> | 14. Health administrator | <input type="checkbox"/> | 37. Speech therapist |
| <input type="checkbox"/> | 15. Health educator | <input type="checkbox"/> | 38. Sports medicine specialist |
| <input type="checkbox"/> | 16. Health/Medical information technologist | <input type="checkbox"/> | 39. Biologist |
| <input type="checkbox"/> | 17. Medical illustrator | <input type="checkbox"/> | 40. Chemist |
| <input type="checkbox"/> | 18. Medical laboratory technician | <input type="checkbox"/> | 41. Other Life Sciences career: _____ |
| <input type="checkbox"/> | 19. Neurologist | <input type="checkbox"/> | 42. Health/Medical Researcher |
| <input type="checkbox"/> | 20. Nuclear medicine technologist | <input type="checkbox"/> | 43. None |
| <input type="checkbox"/> | 21. Nurse Practitioner | <input type="checkbox"/> | 44. Other interests or ideas: |
| <input type="checkbox"/> | 22. Occupational therapist | | _____ |
| <input type="checkbox"/> | 23. Occupational therapy assistant | | _____ |

INSTRUCTIONS: How can we help you plan for your future? Please circle 1 for yes and 2 for no. Feel free to elaborate in the Comments section.

	Yes	No	Comments
15. More programs on health care professions.	1	2	
16. A copy (or CD) of a career guide (including job descriptions and salary ranges).	1	2	
17. Information on what courses to take in school.	1	2	
18. Information on college and graduate-level health professions programs.	1	2	
19. Visit a college with other students in this program.	1	2	
20. Information on financial aid for college.	1	2	
21. A summer work experience in healthcare.	1	2	
22. Other ideas. (Please explain)	1	2	