

ACTIVITY EVALUATION FORM FOR CALIFORNIA MCLE

Please complete and return to Provider:

PLEASE PRINT

Provider Name LOS ANGELES COPYRIGHT SOCIETY

Provider Address c/o 500 S. Buena Vista Street, Burbank, CA 91251-0165

A Copyright System for the 21st Century: One That Works

Date of Offering: June 8, 2011

Site: **Sony Studios, Culver City**

Name of Participant (optional) _____

First

Last

Directions: On a scale of 1-5 (5 being the highest, best or most and 1 being the least, lowest or worst) rate by circling the number reflecting your opinion.

To what extent were your personal objectives satisfied? 5 4 3 2 1

Comments: _____

To what extent did the environment contribute to the learning experience? 5 4 3 2 1

Comments: _____

To what extent did the written material contribute to the learning experience? 5 4 3 2 1

Comments: _____

To what extent were the objectives stated in the promotional literature or those stated at the beginning of the activity satisfied? 5 4 3 2 1

Comments: _____

To what extent did the activity contain significant current intellectual or practical content? 5 4 3 2 1

Comments: _____

	<i>Overall Teaching Effectiveness</i>	<i>Effectiveness of Teaching Method</i>	<i>Significant Current Intellectual or Practical Content</i>
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Instructor's Name: Lawrence Lessig	5 4 3 2 1	5 4 3 2 1	5 4 3 2 1
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Subject/Topic _____

Comments: _____

Instructor's Name:	5 4 3 2 1	5 4 3 2 1	5 4 3 2 1
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Subject/Topic _____

Comments: _____