

Sign-In Sheet

Excise Board, Part 1

Date: 8/27/2019

Time: 3:30 p.m.

Instructor:

Notie Lansford

Sherri Schieffer

	Name (Print)	Position/ Office	Signature	County
1.	Charlie W Rogers	District 1 county commission	Charlie W Rogers	Pittsburg
2.	Wade Mathis	Dist. 1 Foreman	Wade Mathis	Pittsburg
3.	Ross Selman	D ³ Co. Comm.	Ross Selman	
4.	Sandra Crenshaw	1 st Deputy, BOCC	Sandra Crenshaw	Pittsburg
5.				
6.				
7.				
8.				
9.				
10.				

Every person registering for and completing the excise board, part 1 training must sign this sheet.

Following the training, send the signed sheet to OSU-CTP by USPS, by fax, or by scanned document.

OSU-County Training Program
318 Ag Hall
Oklahoma State University
Stillwater, OK 74078

Fax: 405-744-8210

Email: ctp@okstate.edu

PROGRAM EVALUATION

COURSE TITLE: Excise Board Part 1

TRAINERS: _____

DATE: 8-27-19

LOCATION: McAlester Courthouse

	Excellent	Very Good	Good	Fair	Poor
COURSE					
Content	①	●	③	④	⑤
Presentation	①	●	③	④	⑤
Objectives clearly stated	①	●	③	④	⑤
Organized lesson plan	①	●	③	④	⑤
TOTALS	①	●	③	④	⑤
INSTRUCTOR					
Knowledge of content	①	●	③	④	⑤
Preparation	①	●	③	④	⑤
Response to questions	①	●	③	④	⑤
Encouraged participation	①	●	③	④	⑤
OVERALL EVALUATIONS	①	●	③	④	⑤
TOTALS	①	●	③	④	⑤

1. What part of the course stood out as particularly useful to you?

2. What part of the course stood out as NOT particularly useful to you?

3. What other improvements could be made in this course?

4. Other courses/improvements that you would like to see in the future?

5. If you would like us to contact you concerning your comments or recommendations, please provide a name and telephone number/e-mail address?

Name	Telephone Number	E-Mail Address

6. Other comments (please use back of the form as needed):

PROGRAM EVALUATION

COURSE TITLE: Excise Board Part 1

TRAINERS: _____

DATE: 8-27-19 **LOCATION:** McAlester Court House

	Excellent	Very Good	Good	Fair	Poor
COURSE					
Content	①	●	③	④	⑤
Presentation	①	●	③	④	⑤
Objectives clearly stated	①	●	③	④	⑤
Organized lesson plan	①	●	③	④	⑤
TOTALS	①	●	③	④	⑤

INSTRUCTOR

Knowledge of content	①	●	③	④	⑤
Preparation	①	●	③	④	⑤
Response to questions	①	●	③	④	⑤
Encouraged participation	①	●	③	④	⑤
OVERALL EVALUATIONS	①	●	③	④	⑤
TOTALS	①	●	③	④	⑤

1. What part of the course stood out as particularly useful to you?

All of it

2. What part of the course stood out as NOT particularly useful to you?

3. What other improvements could be made in this course?

None

4. Other courses/improvements that you would like to see in the future?

5. If you would like us to contact you concerning your comments or recommendations, please provide a name and telephone number/e-mail address?

Name	Telephone Number	E-Mail Address

6. Other comments (please use back of the form as needed):

PROGRAM EVALUATION

COURSE TITLE: Excise Board Training, Part 1

TRAINERS: Notie Lansford, Sherri Schieffer

DATE: 8/27/2019

LOCATION: Pittsburg Co. Courthouse

COURSE	Excellent	Very Good	Good	Fair	Poor
Content	(1)	●	(3)	(4)	(5)
Presentation	(1)	●	(3)	(4)	(5)
Objectives clearly stated	(1)	●	(3)	(4)	(5)
Organized lesson plan	●	(2)	(3)	(4)	(5)
TOTALS	(1)	●	(3)	(4)	(5)

INSTRUCTOR

Knowledge of content	●	(2)	(3)	(4)	(5)
Preparation	●	(2)	(3)	(4)	(5)
Response to questions	●	(2)	(3)	(4)	(5)
Encouraged participation	●	(2)	(3)	(4)	(5)
OVERALL EVALUATIONS	●	(2)	(3)	(4)	(5)
TOTALS	●	(2)	(3)	(4)	(5)

1. What part of the course stood out as particularly useful to you?

tax valuation example + budget board info

2. What part of the course stood out as NOT particularly useful to you?

none

3. What other improvements could be made in this course?

none

4. Other courses/improvements that you would like to see in the future?

none

5. If you would like us to contact you concerning your comments or recommendations, please provide a name and telephone number/e-mail address?

Name	Telephone Number	E-Mail Address

6. Other comments (please use back of the form as needed):

PROGRAM EVALUATION

COURSE TITLE: Excise Board, Part I

TRAINERS: Notie Lansford - Sherri Schieffer

DATE: 8-27-19 **LOCATION:** Pitt. Co. Courthouse

COURSE	Excellent	Very Good	Good	Fair	Poor
Content	(1)	(2)	(3)	(4)	(5)
Presentation	(1)	(2)	(3)	(4)	(5)
Objectives clearly stated	(1)	(2)	(3)	(4)	(5)
Organized lesson plan	(1)	(2)	(3)	(4)	(5)
TOTALS	(1)	(2)	(3)	(4)	(5)

INSTRUCTOR

Knowledge of content	(1)	(2)	(3)	(4)	(5)
Preparation	(1)	(2)	(3)	(4)	(5)
Response to questions	(1)	(2)	(3)	(4)	(5)
Encouraged participation	(1)	(2)	(3)	(4)	(5)
OVERALL EVALUATIONS	(1)	(2)	(3)	(4)	(5)
TOTALS	(1)	(2)	(3)	(4)	(5)

1. What part of the course stood out as particularly useful to you?

2. What part of the course stood out as NOT particularly useful to you?

3. What other improvements could be made in this course?

4. Other courses/improvements that you would like to see in the future?

5. If you would like us to contact you concerning your comments or recommendations, please provide a name and telephone number/e-mail address?

Name	Telephone Number	E-Mail Address

6. Other comments (please use back of the form as needed):