

# Arbeitskreis vaskulärer Ultraschall



## Evaluierungsbogen

Kursnummer: \_\_\_\_\_  
 Veranstalter: \_\_\_\_\_  
 Veranstaltungsort: \_\_\_\_\_

Kursform:  
 Grundkurs:   
 Aufbaukurs:   
 Abschlusskurs:   
 Anwenderseminar:

Bewertung bitte analog „Schulnoten“ ankreuzen

| <b>Allgemein</b>       | <b>1</b>              | <b>2</b>              | <b>3</b>              | <b>4</b>              | <b>5</b>              | <b>6</b>              |
|------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Kursgesamtnote         | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Organisation           | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Apparative Ausstattung | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Inhalt Vorträge        | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Praktische Übungen     | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Verpflegung            | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| <b>Referenten</b>      | <b>1</b>              | <b>2</b>              | <b>3</b>              | <b>4</b>              | <b>5</b>              | <b>6</b>              |
| Inhalt                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Präsentation           | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
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| Inhalt                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Präsentation           | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| -----                  |                       |                       |                       |                       |                       |                       |
| Inhalt                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Präsentation           | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| -----                  |                       |                       |                       |                       |                       |                       |
| Inhalt                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Präsentation           | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| -----                  |                       |                       |                       |                       |                       |                       |
| Inhalt                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Präsentation           | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| <b>Tutoren</b>         | <b>1</b>              | <b>2</b>              | <b>3</b>              | <b>4</b>              | <b>5</b>              | <b>6</b>              |
|                        | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
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| -----                  |                       |                       |                       |                       |                       |                       |
|                        | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| -----                  |                       |                       |                       |                       |                       |                       |

Bemerkungen:

Insgesamt ist der Kurs  zu empfehlen  
 nicht zu empfehlen

Name (Angabe freiwillig): \_\_\_\_\_