



**American College of Bio-Compatible Health**  
Education Division

**Needs Assessment Survey**

We appreciate your involvement with our continuing education (CE) courses and would like to hear from you. Please complete this questionnaire to let us know of your CE needs.

AGD Dentist      Non-AGD      Hygienist      Dental Assistant      Office Staff      Other  
Dentist

**PLEASE ANSWER THE FOLLOWING QUESTIONS:**

**1. How often do you attend CE courses?**

- a. Less than 15 hours per year      b. Between 16 and 30 hours per year      c. Between 31 and 45 hours per year      d. Between 46 and 60 hours per year      e. More than 60 hours per year

**2. What is most important in your selection of CE providers?**

- a. Cost      b. Location      c. Subject area      d. Instructional methods (self-instruction, lecture, participations)      e. Instructor qualification      f. Other, please explain

**3. Please circle your preferred method of instruction:**

- a. Self-instructional: online      b. Self-instructional: video or CD      c. Self-instructional: article      d. Lecture      e. In-office participation
- f. Participation: live patients      g. Weekend workshop or meeting      h. Lunch & learn

**4. What specific subjects are of interest to you?**

**5. What are your suggestions for future courses?**