

# TRAINING EVALUATION

Training/Course Title: _____		
Trainer(s): _____		
Date(s): _____	Hours: _____	Location: _____

Circle the most suitable answer for each question.

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>STRONGLY DISAGREE</b>	<b>DISAGREE</b>	<b>NEUTRAL</b>	<b>AGREE</b>	<b>STRONGLY AGREE</b>

## TRAINING/COURSE CONTENT

<b>A. Training Objectives were met</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Comments: _____					
<b>B. Trainer was effective in presenting material</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Comments: _____					
<b>C. Trainer enlisted audience participation</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Comments: _____					
<b>D. The training outline was clear and organized</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Comments: _____					
<b>E. Trainer's usage of verbal/non-verbal skills</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Comments: _____					
<b>F. The training material was beneficial to my position</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Comments: _____					
<b>G. Trainer demonstrated a good working knowledge of the training material</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Comments: _____					
<b>H. I learned new things</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Comments: _____					

## Participant Feedback

What I would like to see improved is:

\_\_\_\_\_

\_\_\_\_\_

General Comments:

\_\_\_\_\_

\_\_\_\_\_

Name (Optional) \_\_\_\_\_

Phone (Optional) \_\_\_\_\_