



# TRAINING EVALUATION

Training Event: \_\_\_\_\_

Date: \_\_\_\_\_

	EXCELLENT	GOOD	FAIR	POOR	UNACCEPT- ABLE
1. The instructor explained the LEARNING OBJECTIVES	5	4	3	2	1
2. This session in terms of VALUABLE information you acquired	5	4	3	2	1
3. The USEFULNESS of the materials	5	4	3	2	1
4. The workshop/training OVERALL	5	4	3	2	1

5. How will you apply what you learned?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. What did you find most valuable?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. What changes would you make to improve this workshop/training?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Please include any additional comments.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*If you need more space, or your trainer/instructor has additional questions, please use reverse side.*

*Thank you for attending today and for providing us with your feedback.  
Your comments will be used for Continuous Quality Improvement.*

**9.**

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**10.**

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**11.**

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