

Training evaluation questionnaire

(Name of training session)

(Date)

Was the training content what you expected? Y N

Was the size of the group appropriate? Y N

Did the methods of instruction keep you interested in the topic? Y N

Could you see and hear the presentations clearly? Y N

Please rate the quality of the instruction. 1 2 3 4 5

(1 = unacceptable; 5 = outstanding)

How suitable was the mix of presentation versus activities? 1 2 3 4 5

Please rate the following the qualities of the instructor's delivery:

(1 = unacceptable; 5 = outstanding)

Speed of delivery 1 2 3 4 5

Level of content knowledge 1 2 3 4 5

Organization and preparation 1 2 3 4 5

Enthusiasm 1 2 3 4 5

Ability to keep the group focused 1 2 3 4 5

Please provide any additional feedback for the instructor:

Did you learn anything new? Y N

If yes, please provide details:

Do you have any suggestions to improve this course?

Name: _____ (optional)

Thank you. We appreciate your feedback!

