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!