Name:

Company:

1. Did you clearly understand the course objectives prior attending this course?

Yes/No

1. Were your own objectives for attending the course adequately met?

Yes/No

1. Related to your work, was the training:

1 2 3 4 5

Irrelevant Of some relevance Very relevant

1. How interesting did you find the course?

1 2 3 4 5

Boring Average Very interesting

1. How well was the course programme presented?

1 2 3 4 5

Poorly Acceptable Very well

1. The structure of the course; and the flow from topic to topic and session to session made the course:

1 2 3 4 5

Disjointed Acceptable standard Easy to follow

1. The information given on the course was at a level that was:

1 2 3 4 5

Difficult Generally able to Well-tailored understand

1. Was any part of the course unnecessary?

Yes/No

 If yes, which part?

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1. Did you feel any topics required more attention?

Yes/No

Comment:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Please turn over**

1. Will the knowledge gained help you in your work?

1 2 3 4 5

Of no real benefit Of some help Lots of benefit

1. Which part of the course was of most value to you, and why?

Comment:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Training aids used through the course:

1 2 3 4 5

Insufficient aids Adequate Overdone

Comments:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Was the course instructor(s) enthusiastic and helpful?

Comments:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Your overall rating for the course would be:

1 2 3 4 5

Poor Fair Good Very Good Excellent

1. If you did not give the course the highest rating, how in your mind could the course be improved?

Comments:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Would you recommend the course to your colleagues?

Yes/No