



Date: _____

Title of Seminar: _____

Trainer(s): _____

Please indicate your level of agreement with the statements below:

Strongly Agree Agree Neutral Disagree Strongly Disagree

Comments

1 The objectives of the training were clearly defined

2 The training objectives were met

3 The content was organized and easy to follow

4 The presenters effectively conveyed the subject

5 Participation and interaction were encouraged

6 Questions posed were adequately answered

7 The knowledge and skills gained from this training will be useful in my work

8 I recommend that the training be held again for more employees

9 What is your overall rating of the presenter

Outstanding Excellent Very Good Average Below Average

Comments _____

10 What is your overall rating of the quality of this training

Outstanding Excellent Very Good Average Below Average

Comments _____

Please list one item from the training that you are going to implement or review

Please tell us what would have made this seminar more effective or useful for you

Is there anything else you would like covered in the future? What additional training would be helpful to you?

If you would like us to follow up with you on anything related to this or other trainings, please provide your name and tel#:
