

# Training Evaluation Form



Trainer / Presenter:		Workshop Number:	
Workshop Date:			
Workshop Title:			
Workshop Location:			

## Evaluation of Workshop

**1** Strongly disagree\*   **2** Somewhat disagree   **3** Neutral   **4** Somewhat agree   **5** Strongly agree

1. The objectives for this presentation were clear	1	2	3	4	5
2. The activities reinforced the objectives of the presentation	1	2	3	4	5
3. The workshop was well paced and well organized	1	2	3	4	5
4. Presenter showed thorough knowledge of content	1	2	3	4	5
5. Presenter used materials and audio visual aids effectively	1	2	3	4	5
6. I understood the main concepts and could apply them	1	2	3	4	5
7. The workshop met my needs	1	2	3	4	5

\*Please comment on any items rated as “Strongly disagree” on the back of this form.

## Recommendations / Remarks

8. What I found most useful was ...

9. I would like more of ...

10. Additional remarks ...