

PARTICIPANT EVALUATION

Title of Course:		_
Course Number:		_
Date of Course:		_
1. The course provided what I expected to learn.	☐ Disagree	☐ Agree
2. This training/seminar was worth my time.	Disagree	☐ Agree
3. This training/seminar addressed an important skill/topic that I face in doing my job or is important for my future plans.	□ Disagree	☐ Agree
4. The instructor's presentation/delivery of materials was effective & timely.	□ Disagree	☐ Agree
5. There was good interaction between the trainer(s)/facilitator(s) and the participants (asking questions, providing input, keeping the group on track, etc.).	□ Disagree	☐ Agree
6. What I take away from this training/seminar will have a positive impact on my effectiveness in the future.	□ Disagree	□ Agree
7. Overall, I have benefited from participating in this training/seminar.	□ Disagree	☐ Agree
8. Please tell me how this training/seminar could have been more effective or use this space to elaborate on a statement above.		
9. Would you like additional information and/or training	ng on this topic? If so, pl	ease list topics or subjects: