Training Evaluation Form for Trainees

**Trainee Information:**

* Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Training Session: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Trainer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Session Details:**

* Topic Covered: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Duration: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please evaluate the following aspects of the training session:**

1. **Training Content**
	* Relevance to your needs:

		+ Excellent
		+ Good
		+ Average
		+ Poor
	* Understandability of the material:

		+ Excellent
		+ Good
		+ Average
		+ Poor
	* Coverage of topics:

		+ Excellent
		+ Good
		+ Average
		+ Poor
2. **Trainer Performance**
	* Knowledge of the subject matter:

		+ Excellent
		+ Good
		+ Average
		+ Poor
	* Clarity of explanation:

		+ Excellent
		+ Good
		+ Average
		+ Poor
	* Interaction with participants:

		+ Excellent
		+ Good
		+ Average
		+ Poor
3. **Training Methodology**
	* Effectiveness of teaching methods:

		+ Excellent
		+ Good
		+ Average
		+ Poor
	* Use of practical examples:

		+ Excellent
		+ Good
		+ Average
		+ Poor
	* Pace of training:

		+ Excellent
		+ Good
		+ Average
		+ Poor
4. **Materials and Resources**
	* Quality of training materials (handouts, tools):

		+ Excellent
		+ Good
		+ Average
		+ Poor
	* Availability of resources:

		+ Excellent
		+ Good
		+ Average
		+ Poor
5. **Overall Satisfaction**
	* How satisfied were you with the training?

		+ Very Satisfied
		+ Satisfied
		+ Neutral
		+ Dissatisfied
		+ Very Dissatisfied

**Open Feedback:**

* What was the most useful aspect of the training?
* What could be improved in future sessions?
* Any other comments or suggestions?

**Confirmation:**

* Trainee Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_