

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: _____