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Students Feedback Form for Training Program

**Program Title:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
**Instructor(s):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
**Location:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Instructions:**Please provide your honest feedback about the training program. Your responses are important for improving future sessions.

**1. Clarity of Training Objectives**Were the objectives of the training clear and well defined?  
☐ Strongly Disagree  
☐ Disagree  
☐ Neutral  
☐ Agree  
☐ Strongly Agree

**2. Instructor Knowledge and Expertise**How would you rate the instructor's knowledge and expertise on the subject matter?  
☐ Very Poor  
☐ Poor  
☐ Average  
☐ Good  
☐ Excellent

**3. Relevance of Content**How relevant was the content to your needs or expectations?  
☐ Not relevant at all  
☐ Slightly relevant  
☐ Moderately relevant  
☐ Very relevant  
☐ Extremely relevant

**4. Interaction and Participation**Was there adequate opportunity for interaction and participation?  
☐ Strongly Disagree  
☐ Disagree  
☐ Neutral  
☐ Agree  
☐ Strongly Agree

**5. Practical Application**How practical and applicable was the information presented during the training?  
☐ Not applicable  
☐ Slightly applicable  
☐ Moderately applicable  
☐ Very applicable  
☐ Extremely applicable

**6. Training Materials**How useful were the training materials provided (e.g., handouts, online resources)?  
☐ Not useful  
☐ Slightly useful  
☐ Moderately useful  
☐ Very useful  
☐ Extremely useful

**7. Overall Satisfaction**Overall, how satisfied are you with the training program?  
☐ Very Unsatisfied  
☐ Unsatisfied  
☐ Neutral  
☐ Satisfied  
☐ Very Satisfied

**8. Suggestions for Improvement**Please provide any suggestions that could make this training more effective.

**9. Additional Comments**Any other comments or feedback?

**Thank you for your feedback!**