

GOVERNOR TRAINING & DEVELOPMENT SERVICE

COURSE EVALUATION

Please take a few minutes to fill in this form. It is important. Your feedback, whether it be praise or constructive criticism, will help us to ensure that the courses we offer are interesting, informative and what you want to be hearing about. All comments will be considered and treated as confidential.

Course Title:

Date:

For each statement circle the number which best reflects your views on a scale of 1 to 5.

		<u>Agree</u>			<u>Disagree</u>	
1	The session met the objectives in the course outline	1	2	3	4	5
2	I now have a clearer understanding of the role of a school Governor	1	2	3	4	5
3	The course met my expectations	1	2	3	4	5
4	The course will be of value to me in my role as a governor	1	2	3	4	5
5	The information was given in a clear and precise manner	1	2	3	4	5
6	The venue was satisfactory	1	2	3	4	5
7	Questions that were raised were answered satisfactorily	1	2	3	4	5
8	The day and time of the course were satisfactory	1	2	3	4	5
9	The overall experience was helpful and informative	1	2	3	4	5
10	I shall encourage other governors to attend training sessions	1	2	3	4	5
11	Please outline here any questions you still have on the topic: Would you like to see events like this repeated? Yes / No					
12	Any other comments that you would like to make on the session or the governor training programme as a whole:					
13	Any other comments that you would like to make on the governor training programme:					
14	Would you utilise information on courses online?	YES NO				
15	Would you benefit from an A4 ring binded Torfaen Handbook, in which all meeting papers and school documents could be held?	YES NO				
16	May I contact you in 2 months to discuss your progress and any further support you may require?	YES NO * if yes please provide a contact telephone number or email address _____				

Signed (if you wish) _____