Training/Workshop Evaluation Form

Directions: Thank you for attending this training/workshop! District-wide feedback is an important part of the planning and evaluation process at the College of the Sequoias. Please answer the following questions about this training/workshop. Your participation in this survey is voluntary and confidential.

Name of Training/Workshop: _____

Name of Trainer(s)/Facilitator(s): _____

Date of Training/Workshop: _____

1 Strongly Agree	2 Agree	3 Disagree	4 Strongly Disagree

1. The material presented in the training/workshop was easy to follow and understand…..... 1 2 3 4
2. The amount of material covered in the training/workshop was appropriate and reasonable……..... 1 2 3 4
3. The material presented in the training/workshop was helpful to me……. 1 2 3 4
4. The material presented in the training/workshop is applicable to my work area…… 1 2 3 4
5. The material presented in the training/workshop is relevant and useful to my professional development…….. 1 2 3 4
6. I plan to implement information and/or strategies learned…… 1 2 3 4

1 Excellent	2 Very Good	3 Good	4 Poor	5 Very Poor

7. How would you rate the overall presentation skills and knowledge of the trainer(s)/facilitator(s)? 1 2 3 4 5
8. What is your overall assessment of the training/workshop?……..... 1 2 3 4 5

(Please Turn Over to Complete Comments Section)

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9. What did you like most about this training/workshop?

10. What would have made the session more effective, interesting, etc.? Any suggestions for improvement?

Thank you for completing the survey!