



### Participant Course Evaluation Form

Thank you for participating in American Red Cross training. We would like to give you an opportunity to tell us what you thought about the course. This evaluation is completely voluntary and anonymous; so please do not write your name on the evaluation. We greatly appreciate your feedback.

Today's date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Location of training/course: \_\_\_\_\_

What was the name of this course: \_\_\_\_\_

Please respond to the following statements about the course. **(Circle only one response.)**

	<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Agree</b>	<b>Strongly Agree</b>	<b>Not Sure</b>
1. The instructor was well prepared.	1	2	3	4	?
2. The instructor communicated information clearly.	1	2	3	4	?
3. The instructor was able to answer questions.	1	2	3	4	?
4. I had enough time to practice skills.	1	2	3	4	?
5. I received enough feedback from the instructor during skill practice sessions.	1	2	3	4	?
6. The participant materials helped me learn the skills.	1	2	3	4	?
7. As a result of the course, I feel better prepared to respond to an emergency.	1	2	3	4	?
8. I was satisfied with the course.	1	2	3	4	?
9. I would recommend this course to others.	1	2	3	4	?



Which part of this course did you like the most? Why?

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Which part of this course did you like the least? Why?

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Please write any additional comments or suggestions about this training below:

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The information in this section helps us know more about the people we reach with our educational programs. This section is completely voluntary and anonymous.

What is your gender?  Female  Male

What is your age? \_\_\_\_\_

What is your ethnicity?

- |  |   |
|--|---|
| <input type="checkbox"/> White (Non-Hispanic)          | <input type="checkbox"/> Black/African American                 |
| <input type="checkbox"/> Hispanic/Latino               | <input type="checkbox"/> American Indian/Alaskan Native         |
| <input type="checkbox"/> Asian                         | <input type="checkbox"/> Native Hawaiian/Other Pacific Islander |
| <input type="checkbox"/> Other, including multi-ethnic |   |

**Thank you for completing the evaluation!**