

TRAINING FEEDBACK FORM



Name (Optional):	
Date:	
Course Title:	
Facilitator Name:	
Venue:	

Dear Participant, we request you to provide us open feedback to make this training process more effective. We shall really appreciate your time in filling up this form. The rating scale is:

DIMENSION		RATING			
S.No	TRAINER	4 Excellent	3 Good	2 Fair	1 Poor
1	To what extent did the trainer clarify the objectives of the training?				
2	How do you rate the trainer's level of interaction?				
3	To what extent did the trainer satisfactorily answer your questions?				
4	Was the trainer able to help you learn through activities & exercises?				
5	Did you find the trainer's pace of conducting the session comfortable for learning?				
6	How do you rate the overall ability of the trainer?				
CONTENT					
7	Did you find the content relevant to your job?				
8	To what extent can you utilize the learning from this training?				
9	To what extent was the content appropriate to your individual needs?				
10	Was the content clear & organised logically?				
FACILITY					
11	Was the training venue comfortable?				
12	To what extent was technology effectively used to facilitate learning?				
OVERALL					
13	To what extent would you recommend your colleagues with similar needs to your own to attend this module?				
14	How do you rate the overall training session?				

In your opinion what are the strong & weak points of this training? Please mention

Strengths	Weaknesses

What new skills & procedures you have learnt from this training course?

From this training course, what benefits you can provide to company?

Any Other comments / suggestions?

Thanks for your Feedback
HR Department
Techaccess Pakistan

TECHACCESS PAKISTAN

POST TRAINING – TRAINEE EVALUATION FORM

(Submitted to HR Department within six weeks after completion of training program)

Topic: _____ Training Dates: _____

Trainer's Name: _____ Trainee's Name: _____

Training Venue: _____ Trainee's Designation: _____

How would you rate each one of the following:

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
The training adequately met your expectations					
You have observed a positive change in yourself					
This training was beneficiary in terms of Transfer of Knowledge					
You have acquired knowledge during training and practically implemented in your work					
Your objectives were identified and followed in this training					

What three main techniques/skills you have learned during training?

Please give example of how to put newly learned skills/information into practice?

Have you made any changes to your working practices as a result of attending this training? Please give an example.
