

Induction Feedback Form for Employee

This form is designed to collect feedback on the employee induction program. Your insights will help us improve future programs.

Personal Information

- Name: _____
- Department: _____
- Role: _____
- Date of Induction: _____

Feedback on Induction Program

1. How would you rate the overall induction program?
 Excellent Good Satisfactory Needs Improvement
2. Did the program provide clear insights into the company's culture and values?
 Yes No Partially
3. Were the objectives of the induction program met?
 Yes No Partially

Comments and Suggestions

Signature: _____ Date: _____