



Course Evaluation (MULTIPLE INSTRUCTORS)

Course: _____

Date(s): _____ Location: _____

Instructions: Please complete this evaluation by placing a ✓ in the appropriate column on the scale below. Your feedback will assist the South Central Training and Learning Center in improving our programs. All input will remain confidential.

5 = Strongly Agree
1 = Strongly Disagree

Evaluation Criteria:		5	4	3	2	1
1.	The facilities and equipment were favorable to learning.					
2.	The course met all of its stated objectives.					
3.	The course was delivered effectively.					
4.	Participant materials were useful during the course.					
5.	I had enough time to learn material covered in the course.					
6.	The course content was logically organized.					
7.	My knowledge/skills increased as a result of this course.					
8.	The knowledge/skills gained are applicable to my job.					
9.	Overall I was satisfied with:					
	Instructor #1:					
	Instructor #2:					
	Instructor #3:					
10.	Overall I was satisfied with this course.					

Most beneficial aspects of training:

Least beneficial aspects of training:

Other comments and/or suggestions:

Other training programs I would like to see offered:

Name (optional)

Phone (optional)