

FINAL EVALUATION FORM

Adapting and Responding to Change

11-13 November 2024

Al Ain City, UAE

Speaker	DR. HADI AL RAKAH
Delegate's Name	Tarek Al Akhbari

Thank you for taking the time to provide us with some feedback regarding your recent training experience with us.

Objectives	poor	fair	good	very good	excellent
	1	2	3	4	5
The objectives of the training were clearly defined	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Participation and interaction with participants were encouraged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The exercises/role play were helpful and relevant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
The trainers were well prepared and able to answer any questions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
The content of the course was organised and easy to follow	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The materials were helpful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Instructor was knowledgeable about the topics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
The training objectives were met	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The pace of the course was appropriate to the content and attendees	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Meeting rooms and facilities were adequate and comfortable	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments

It was a fruitful training experience

Other courses that you might be interested for BOOST to conduct

Risk Mgmt, Employee's mental health

Delegate's Signature

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Speaker DR. HADI AL RAKAH

Delegate's Name Mohamad Khalil

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Comments

Other courses that you might be interest for BOOST to conduct

Mohamad Khalil
Delegate's Signature

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Speaker	DR. HADI AL RAKAH
Delegate's Name	Mohammed AlJaheri

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Speaker DR. HADI AL RAKAH

Delegate's Name ENGEL BILAL

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Comments

DR HADI Demonstrate the course in Professional way! Appreciated

Other courses that you might be interest for BOOST to conduct

Health safety related courses

Bilal

Delegate's Signature

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Al Ain City, UAE

Speaker DR. HADI AL RAKAH

Delegate's Name

EHAR BICAL

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Other courses that you might be interest for BOOST to conduct

- Healthy safety debited course

BICAL

Delegate's Signature

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Al Ain City, UAE

Speaker	DR. HADI AL RAKAH
Delegate's Name	<i>Bandobaid Alwagadi</i>

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Comments

*good and experience instructor, high educated
good to have him in every course.*

Other courses that you might be interest for BOOST to conduct


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Speaker	DR. HADI AL RAKAH
Delegate's Name	<i>Saud Abaid Alwagadi</i>

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Comments

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Other courses that you might be interest for BOOST to conduct

[Signature]
Delegate's Signature