|  |  |  |
| --- | --- | --- |
| **Your Feedback Matters!** | Participant Name |  |
| Designation |  |
| Location |  |

You will appreciate that feedback is an important aspect which will support any organization to meet the customer expectations. Please take a few minutes to fill-in this survey form.

Provide your ratings to indicate *How satisfied you are you* with respect to the following in the scale of 1 – 7

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|  |  | Extremely Dissatisfied | Very Dissatisfied | Dissatisfied | Neutral | Satisfied | Very Satisfied | Extremely Satisfied |
| 1 | Was the topic well understood? |  |  |  |  |  |  |  |
| 2 | Has the training improved your knowledge? |  |  |  |  |  |  |  |
| 3 | Can the learning be applied to your job? |  |  |  |  |  |  |  |
| 4 | Was the training style of the trainer good? |  |  |  |  |  |  |  |
| 5 | Was the trainer enthusiastic and interested? |  |  |  |  |  |  |  |
| 6 | Was the training session interactive? |  |  |  |  |  |  |  |
| 7 | Was the duration of the training session appropriate? |  |  |  |  |  |  |  |

Please mention a few areas where we could have done better:

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*The response of this MFA shall be analyzed based on overall compiled group response and individual responses shall not be disclosed. Feel free to give honest feedback.*