

Course Name:

Attendee name:

Course Start Date:

Course Length (days):

Days attended in full: 1 2 3 4 5

Attendee role / title:

Attendee phone and email:

For the numeric questions below, select a number between 1 (Worst) and 5 (Best). Please add specific suggestions or comments to any of the questions; the more specific your feedback the more helpful it is.

Course Feedback**Comments / Notes***1=Worst to 5=Best*

1. Overall evaluation of the course		1 2 3 4 5
2. Were the course materials well structured?		1 2 3 4 5
3. Were the concepts presented in an understandable sequence?		1 2 3 4 5
4. Were the exercises relevant to the concepts and techniques taught?		1 2 3 4 5
5. Were the exercises helpful?		1 2 3 4 5
6. Was there adequate context and overview preceding each topic?		1 2 3 4 5
7. Were the topics within the course appropriate?		1 2 3 4 5
8. Was the time available appropriately distributed across topics?		1 2 3 4 5
9. Would you recommend this course to others?		1 2 3 4 5
10. What was most helpful or effective part of the course? Why?		
11. What was least helpful or least effective part of the course? Why?		
12. Any other comments or suggestions about the course?		
13. What other audiences and/or courses would you suggest?		

Attendee name:

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Instructor Feedback

Comments / Notes

1=Worst to 5=Best

1. Overall evaluation of the instructor		1 2 3 4 5
2. Knowledge of subject		1 2 3 4 5
3. Effectiveness of communication		1 2 3 4 5
4. Ability to answer student's questions		1 2 3 4 5
5. Time management		1 2 3 4 5
6. Would you recommend other courses with this instructor?		1 2 3 4 5
7. What was most helpful or effective thing the instructor did? Why?		
8. What was least helpful/effective thing the instructor did? Why?		
9. Any other comments or suggestions about the instructor?		