

Training Evaluation Form

for participants in Devco, CTV and Hopeman Consultants UK Trainings Programmes

Date: _____

Title and location of training:

Trainer:

Instructions: Please indicate your level of agreement with the statements listed below;

| | Strongly Agreed | Agreed | Neutral | Disagree | Strongly Disagree |
|---|--------------------|--------|---------|----------|----------------------|
| 1. The objectives of the training were clearly defined. | | | | | |
| 2. Participation and interaction were encouraged | | | | | |
| 3. The topics covered were relevant to me | | | | | |
| 4. The content was organised and easy to follow | | | | | |
| 5. The materials distributed were helpful | | | | | |
| 6. The training experience will be useful in my work | | | | | |
| 7. The trainer was knowledgeable about the training topics. | | | | | |
| 8. The trainer was well prepared | | | | | |
| 9. The training objectives were met. | | | | | |
| 10. The time allotted for the training is sufficient | | | | | |
| 11. The meeting room and facilities were adequate and comfortable | | | | | |