**TRAINING FEEDBACK FORM**

**Please tell us what you thought of this training! Your honest feedback will help us plan and improve the training for future participants and also meet your additional training needs.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***Please answer questions 1-6 by completely filling in the circle that BEST describes your agreement/ disagreement with the statement.*** | **Strongly Agree** | **Agree** | **Disagree** | **Strongly****Disagree** |
| 1. Trainer(s) were knowledgeable and engaging. | ⭘ | ⭘ | ⭘ | ⭘ |
| 2. The presentations were clear. | ⭘ | ⭘ | ⭘ | ⭘ |
| 3. The presentation styles were a good match for how I learn. | ⭘ | ⭘ | ⭘ | ⭘ |
| 4. I will be able to apply today’s content in my work. | ⭘ | ⭘ | ⭘ | ⭘ |
| 5. Today’s training was a good use of my time. | ⭘ | ⭘ | ⭘ | ⭘ |

|  |
| --- |
| 6. I would like more information about:  |
| 7. I would like individual technical assistance (TA) on the following topics from today’s training: |
| 8. Additional comments about today’s training: |

**If you requested information and/or TA on any of the items above, please give us your name and phone number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Thank you for taking the time to complete this form.***