



**Training Feedback Form**

**Name:** ..... **Date:** .....  
**Name of course:** ..... **Course date:** .....  
**Provider:** .....

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In order to evaluate the course / seminar that you have just attended, you are requested to complete this short questionnaire.

1. Which training needs were to be addressed through this training course / seminar.

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2. Were these training needs met?

Yes                      No

If No, why not
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3. List the most important things you either learnt or that were reinforced at the training.

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Comments:
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Appendix 1

4. What would be the best methods of feeding this back to other members of staff?

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5. Were handouts / course materials made available for you?    Yes      No

(If, yes, please take a copy and pass to Resources Manager for logging in the training library)

6. How will what you have learnt, change / enhance the way you work

7. Please list any useful contact made on the day

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8. In your opinion would you consider this course/seminar beneficial to other / future staff?

Yes                      No

If No, why not

9. In your opinion do you consider this course/seminar value for money?

Yes                      No

If No, why not

Appendix 1

**The Training Providers :**

1. Were you well looked after on the day?      Yes                      No

If No, why not
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2. Were you provided with refreshments?      Yes                      No

3. Did you enjoy the day overall?              Yes                      No

If No, why
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After completion please return this form to your Line Manager with a copy to the Resources Manager for filing

Thank you