LifeSavers

Training for Life TM

Evaluation Form

Instructor Name:			
Date of Course:			
Course (circle course taught):	Healthcar	e Provider	Heartsaver AED
Hearts	saver First A	id with AED	Heartsaver First Aid
Did this course fulfill you	r EXPECTA	TIONS?	
What did you like the BES	ST about this	s course?	
What would have made th	is course EV	'EN BETTE	R than it was?
Did you receive adequate questions, practice, testing		TENTION 1	from the instructor(s) for
What did you LIKE about your instructor(s)?			
What areas could the instr	ructor(s) IMF	PROVE upor	n?
How would you overall rate this CPR or First Aid Course in comparison to courses taken with other companies? (circle)			
Not as good Abou	it the same	Better	Best I've ever had!!!!!

Thank You for your comments!

First Course I've ever taken