

## Trainer Evaluation Form

Course Title:

Date:

Venue:

*In order for us to continually improve the services we offer to our members, it would be appreciated if you could please spare a few moments to complete this questionnaire.*

Name: .....

Phone: .....

Email: .....

### Venue

How did you rate the venue?

<b>Facilities</b>	Excellent <input type="radio"/>	Good <input type="radio"/>	Adequate <input type="radio"/>	Poor <input type="radio"/>
<b>Accessibility</b>	Excellent <input type="radio"/>	Good <input type="radio"/>	Adequate <input type="radio"/>	Poor <input type="radio"/>
<b>Ventilation</b>	Excellent <input type="radio"/>	Good <input type="radio"/>	Adequate <input type="radio"/>	Poor <input type="radio"/>
<b>Noise</b> (Internal/External)	Excellent <input type="radio"/>	Good <input type="radio"/>	Adequate <input type="radio"/>	Poor <input type="radio"/>
<b>Layout of room</b>	Excellent <input type="radio"/>	Good <input type="radio"/>	Adequate <input type="radio"/>	Poor <input type="radio"/>
<b>Lighting</b>	Excellent <input type="radio"/>	Good <input type="radio"/>	Adequate <input type="radio"/>	Poor <input type="radio"/>

Comments:

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### Resources/Facilities

How did you rate the resources/facilities of the venue?

<b>IT hardware/software</b>	Excellent <input type="radio"/>	Good <input type="radio"/>	Adequate <input type="radio"/>	Poor <input type="radio"/>
<b>Screen/flip chart</b>	Excellent <input type="radio"/>	Good <input type="radio"/>	Adequate <input type="radio"/>	Poor <input type="radio"/>
<b>Power connections</b>	Excellent <input type="radio"/>	Good <input type="radio"/>	Adequate <input type="radio"/>	Poor <input type="radio"/>

Comments:

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### Catering Facilities

How did you rate the catering facilities?

<b>Timings/Flexibility</b>	Excellent <input type="radio"/>	Good <input type="radio"/>	Adequate <input type="radio"/>	Poor <input type="radio"/>
<b>Quality/Quantity</b>	Excellent <input type="radio"/>	Good <input type="radio"/>	Adequate <input type="radio"/>	Poor <input type="radio"/>

Comments:

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**Do you feel that your objectives outlined at the start of the course were met?**

