



Your feedback is important to us. It is used to revise and improve courses.

*Please complete all sections and return to the Trainer at the end of the session.*

Your name:

School/Office:

Course Title:

E-mail:

Facilitator/Trainer:

Date:

## a) The Facilitator/Trainer

	Excellent 4	Good 3	Satisfactory 2	Poor 1
How would you rate their communication style and delivery	<input type="text"/>			
How would you rate their ability at passing on skills and knowledge to you	<input type="text"/>			
Overall how effective were they at delivering the training Programme	<input type="text"/>			

Please comment on your ratings:

## b) Programme Delivery

	Excellent 4	Good 3	Satisfactory 2	Poor 1
How would you rate the quality of the training materials provided	<input type="text"/>			
How would you rate the relevance of the handouts/documentation	<input type="text"/>			
How would you rate the quality of the training facilities	<input type="text"/>			

Please comment on your ratings:

## c) Programme Content

	Completely 4	Good 3	Satisfactory 2	Irrelevant 1
The content was highly relevant to my job role	<input type="text"/>			
I will be able to apply the knowledge and skills I have learnt back in my workplace				Yes / No <input type="text"/>
I would recommend this training programme to colleagues				Yes / No <input type="text"/>

Please comment on your ratings:



## d) Overall Effectiveness

List three things you found most beneficial about the training programme:

Please explain why this is the case:

What aspects were of the least benefit to you:

Please explain why this is the case:

What actions are you going to take as a result of attending the training programme:

Excellent	Good	Satisfactory	Poor
4	3	2	1

How would you rate the training programme overall?

Thank you for your valuable feedback. Please return the completed form to Organisation and Staff Development office, [staffdevelopment@nuigalway.ie](mailto:staffdevelopment@nuigalway.ie).