

TRAINING EVALUATION

Training Subject: _____ Location _____

Date(s) of Course: _____

Course Number: _____

Please circle the appropriate response.

Evaluate the Material

- | | NA | Poor | | | Excellent | | |
|---|----|-----------|-------------|---|-------------|---|--|
| | | No | not clear | | Yes | | |
| | | 1 | 2 | 3 | 4 | 5 | |
| 1. Were Training goals presented prior to the training? | | | | | | | |
| 2. Material covered will help me do my job better | | | | | | | |
| 3. Material covered was primarily new information | NA | 1 | 2 | 3 | 4 | 5 | |
| 4. Presentation level was: | | too basic | about right | | too complex | | |
| 5. Material was well organized | | 1 | 2 | 3 | 4 | 5 | |
| 6. Audio/Visuals were useful and appropriate | NA | 1 | 2 | 3 | 4 | 5 | |
| 7. Take home material was appropriate | NA | 1 | 2 | 3 | 4 | 5 | |
| 8. There was adequate time for training | | 1 | 2 | 3 | 4 | 5 | |
| 9. List 3 things to improve the curriculum _____ | | | | | | | |
| 10. List the 3 best things from the curriculum _____ | | | | | | | |
-

Evaluate the Location

- | | NA | Poor | | | Excellent | | |
|--|----|------|---|---|-----------|---|--|
| | | 1 | 2 | 3 | 4 | 5 | |
| 1. Room large enough to accommodate participants? | | | | | | | |
| 2. Bathrooms were clean and large enough | | 1 | 2 | 3 | 4 | 5 | |
| 3. Access to meal was convenient | NA | 1 | 2 | 3 | 4 | 5 | |
| 4. Snacks and breaks were sufficient | NA | 1 | 2 | 3 | 4 | 5 | |
| 5. This location was comfortable (climate, seats, etc) | NA | 1 | 2 | 3 | 4 | 5 | |
| 6. Travel directions were accurate and easy to use | NA | 1 | 2 | 3 | 4 | 5 | |
| 7. Available Overnight accommodations | NA | 1 | 2 | 3 | 4 | 5 | |

Evaluate other aspects

- | | NA | Poor | | | Excellent | | |
|--|----|------|----|---|-----------|---------|--|
| | | 1 | 2 | 3 | 4 | 5 | |
| 1. I knew of my participation well in advance | | | | | | | |
| 2. I was at this training because: | | | | | | | |
| a. My supervisor made me | | | | | | | |
| b. I volunteered | | | | | | | |
| c. This will help advance my career | | | | | | | |
| d. This is on my IDP | | | | | | | |
| 3. Do you feel you got your money's worth from this session? | | Yes | No | | | | |
| 4. How long have you worked for NRCS/DSC/ or SWCD? | | | | | _____ | Years | |
| 5. What is your current title/position? _____ | | | | | _____ | Years | |
| 6. How long have you been in your current position? | | | | | _____ | Years | |
| 7. Did this training help you with your job? | | Yes | No | | | Depends | |

Evaluate the Presenter/Instructor(s) **Name of Trainer** _____

- | | | | | | |
|---|---|---|---|---|---|
| 1. Trainer was knowledgeable about material | 1 | 2 | 3 | 4 | 5 |
| 2. Training was well organized and understandable | 1 | 2 | 3 | 4 | 5 |
| 3. Trainer interacted with trainees well | 1 | 2 | 3 | 4 | 5 |
| 4. Trainer answered questions | 1 | 2 | 3 | 4 | 5 |
| 5. Trainer used methods and techniques to ensure everyone understood the training | 1 | 2 | 3 | 4 | 5 |
| 6. Trainer had enough training materials and explained the training goals | 1 | 2 | 3 | 4 | 5 |
| 7. The training presented was interesting | 1 | 2 | 3 | 4 | 5 |
| 8. Trainer ensured appropriate participation by trainees | 1 | 2 | 3 | 4 | 5 |
| 9. List three things the presenter needs to do better _____
_____ | | | | | |
| 10. List three things the present needs to continue _____
_____ | | | | | |



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_____ | | | | | |
| 10. List three things the present needs to continue _____
_____ | | | | | |