**Training Evaluation Form**

**For participants in Minimizer Territory Training**

Date:

Name and Job Title:

Trainer:

Instructions: Please indicate your level of agreement with the statements listed below in #1 -11.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Strongly Agree | Agree | Neutral | Disagree | Strongly Disagree |
| 1. The objective of the training was clearly defined. | o | o | o | o | o |
| 2. Participation and interaction was encouraged. | o | o | o | o | o |
| 3. The topics covered were relevant to me. | o | o | o | o | o |
| 4. The content was organized and easy to follow. | o | o | o | o | o |
| 5. The materials distributed were helpful. | o | o | o | o | o |
| 6. The training experience will be useful in my work. | o | o | o | o | o |
| 7. The trainer was knowledgeable about the training topics. | o | o | o | o | o |
| 8. The trainer was well prepared. | o | o | o | o | o |
| 9. The training objectives were met. | o | o | o | o | o |
| 10. The time allotted for the training was sufficient. | o | o | o | o | o |
| 11. The meeting room and facilities were adequate and comfortable. | o | o | o | o | o |

12. What did you like most about the training?

13. What didn’t you like about the training?

14. What aspects of the training could be improved?

15. What would you like to see added or removed from the training session?

16. What additional Minimizer training would you like to have in the future?

17. Please share other comments or expand on previous responses here.

*We value your opinion; we feel this is what sets us apart from other vendors you currently work with. Your opinion matters to us! We ask that you take a few minutes to give us your honest evaluation; this will strengthen our training capabilities for future products and training sessions to come. We value your opinion so much, that we will draw monthly winners from completed evaluation forms. Your completion could earn you a* ***$100.00 gift card****. Thank you!*