**Training Evaluation Form**

|  |  |  |  |
| --- | --- | --- | --- |
| **Organization Name:** |  | **Department:** |  |
| **Trainer(s):** |  | **Department:** |  |
| **Date of Training:** |  | **Duration:** |  |

**Section 1: Participant Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Participant Name: |  | Designation |  |
| Email / Contact |  |  |  |

**Section 2: Training Content Evaluation**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Criteria** | **Excellent (5)** | **Good (4)** | **Average (3)** | **Fair (2)** | **Poor (1)** |
| Relevance of the training content | ☐ | ☐ | ☐ | ☐ | ☐ |
| Clarity of objectives | ☐ | ☐ | ☐ | ☐ | ☐ |
| Usefulness of materials provided | ☐ | ☐ | ☐ | ☐ | ☐ |
| Applicability to your job | ☐ | ☐ | ☐ | ☐ | ☐ |
| Overall quality of training | ☐ | ☐ | ☐ | ☐ | ☐ |

**Section 3: Trainer Evaluation**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Criteria** | **Excellent (5)** | **Good (4)** | **Average (3)** | **Fair (2)** | **Poor (1)** |
| Trainer’s knowledge of the subject | ☐ | ☐ | ☐ | ☐ | ☐ |
| Trainer’s communication skills | ☐ | ☐ | ☐ | ☐ | ☐ |
| Trainer’s ability to engage participants | ☐ | ☐ | ☐ | ☐ | ☐ |
| Response to participant questions | ☐ | ☐ | ☐ | ☐ | ☐ |
| Overall trainer performance | ☐ | ☐ | ☐ | ☐ | ☐ |

**Section 4: Training Logistics**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Criteria** | **Excellent (5)** | **Good (4)** | **Average (3)** | **Fair (2)** | **Poor (1)** |
| Venue / Online platform quality | ☐ | ☐ | ☐ | ☐ | ☐ |
| Duration / Time management | ☐ | ☐ | ☐ | ☐ | ☐ |
| Audio-visual aids and materials | ☐ | ☐ | ☐ | ☐ | ☐ |
| Administrative arrangements | ☐ | ☐ | ☐ | ☐ | ☐ |

**Section 5: Learning Outcomes**

|  |
| --- |
| What key skills or knowledge did you gain from this training? |
|  |
| How will you apply this learning to your job? |
|  |
| What aspects of the training could be improved? |
|  |

1. Would you recommend this training to others?  
   ☐ Yes  ☐ No  ☐ Maybe

**Section 6: Overall Rating**

|  |  |
| --- | --- |
| Overall Satisfaction | ☐ Excellent ☐ Good ☐ Average ☐ Fair ☐ Poor |

**Section 7: Additional Comments**

|  |
| --- |
|  |
|  |
|  |

**For Administrative Use**

|  |  |  |  |
| --- | --- | --- | --- |
| Received by |  | Date Received |  |
| Data Entered by |  |  |  |