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| **Work Package** |  |
| **Training** |  |
| **Date** |  |
| **Your name (not compulsory)** |  |
| **Your company/organisation (not compulsory)** |  |

Answer each question with an evaluation from 1-5, where 1 is Poor and 5 is Very Good.

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|  | **1** | **2** | **3** | **4** | **5** |
| **What is your opinion of the general organization and facilities of the training session?** |  |  |  |  |  |
| **To which extent did the training/info session live up to your expectations?** |  |  |  |  |  |
| **What is your opinion of the Trainers?** |  |  |  |  |  |
| **How do you evaluate the relevance and clarity of the topics of the training session?** |  |  |  |  |  |
| **How do you evaluate the technical resources used?** |  |  |  |  |  |
| **How effective do you think was the methodology used?** |  |  |  |  |  |
| **How useful was the training material used?** |  |  |  |  |  |
| **How valuable was the training for your professional growth?** |  |  |  |  |  |
| **Would you recommend this session to somebody else (YES/NO)?** |  | | | | |

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| **Which topics were not covered?** |
| **Which items were not relevant?** |
| **Are you interested in other themes or topics, other events or seminars? Which ones?** |