

**Feedback form - Training**

We appreciate you taking the time to send us feedback on your recent training. Your feedback helps us to focus our improvement efforts and better serve-YOU. We read all feedback we receive and take what you have to report seriously. We truly value your input.

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Date: \_\_\_\_\_ email: \_\_\_\_\_

|  |     |    |
|--|-----|----|
| Was the training environment comfortable to you? | Yes | No |
| Could you see all visuals on screen clearly?     | Yes | No |
| Could you hear the trainer clearly?              | Yes | No |
| Was handout material useful?                     | Yes | No |

Special Training I would like to see in the future:

Other Suggestions and Comments: