



Participant Evaluation Form

NAME (BLOCK LETTERS) OPTIONAL:

DATE:

COURSE:

Perth Boat School is committed to providing effective training programs. Your feedback on our courses is extremely critical to our ongoing continuous improvement. Please take a moment to provide us with your thoughts regarding your training program. Please place a circle around the number which indicates your rating of the following:.

(Please circle appropriate number)

COURSE EVALUATION	Poor	Below Average	Above average	Excellent
Course material was sufficient to achieve learning outcomes	1	2	3	4
Activities were meaningful	1	2	3	4
Activities provided sufficient group interaction	1	2	3	4
Venue provided comfortable environment	1	2	3	4
Venue facilities were adequate	1	2	3	4
TRAINER EVALUATION	Poor	Below Average	Above average	Excellent
Trainer's Presentation Skills	1	2	3	4
Trainers Knowledge	1	2	3	4
Trainers interaction with participants	1	2	3	4
Topics/content covered in the session	1	2	3	4
Method of training to achieve the learning outcome	1	2	3	4

What did you like most?

What did you like least?

Any further comments:

**Please give this back to your trainer
Thank you for your assistance in this questionnaire**