



Management Evaluation Form

Company Name:

Manager's Name

Position Title:

DATE:

COURSE:

Perth Boat School is committed to providing effective training and assessment services meeting the needs of our clients. Your feedback is extremely critical to our ongoing continuous improvement. Please take a moment to provide us with your thoughts regarding the training program your staff have recently undertaken with Perth Boat School. Please place a circle around the number which indicates your rating of the following:

(Please circle appropriate number)

Course	Poor	Below Average	Above average	Excellent
Feedback from your staff regarding the course	1	2	3	4
Relevance of course to workplace performance	1	2	3	4
Effectiveness of course relative to your staff	1	2	3	4
Improvement in staff skills after training	1	2	3	4
ASSESSMENT MATERIALS /FORMS	Poor	Below Average	Above average	Excellent
Clarity of assessment materials	1	2	3	4
Relevance of assessment tasks to workplace performance	1	2	3	4
Provision of assessment templates / examples	1	2	3	4

What parts of the program have been effective? Why?

What parts of the program could be improved? Why? How?

How could Perth Boat School support learning for your staff further in the future?

**Please give this back to the Manager of Perth Boat School
Thank you for your assistance in this questionnaire**