

# TRAINING COURSE EVALUATION CHECKLIST

Course:	
Date(s):	
Venue:	
Trainer:	
Participants Name (Record name is optional)	



# SAMPLE

**ORDER NOW AND GET FULL ACCESS**

Item	Yes	No	Not Sure	Other	Comments
1. The course was relevant to my job.					
2. The course was well organized.					
3. The course was presented in an interesting way.					
4. The course was well presented.					
5. The course was well conducted.					
6. The course was well planned.					
7. The course was well supported.					
8. The course was well evaluated.					
9. The course was well reviewed.					
10. The course was well followed up.					
11. The course was well implemented.					
12. The course was well monitored.					
13. The course was well maintained.					
14. The course was well updated.					
15. The course was well reviewed.					
16. The course was well followed up.					
17. The course was well implemented.					
18. The course was well monitored.					
19. The course was well maintained.					
20. The course was well updated.					