

Assistant Ombudsman Training Evaluation

Date: _____

(Please rate from lowest to highest.)

1. Did the training meet your expectations? 1 2 3 4 5

2. Was the training well organized? 1 2 3 4 5

3. Was the material well presented? 1 2 3 4 5

4. Would you recommend this training? 1 2 3 4 5

5. How do you rate this training? 1 2 3 4 5

6. How do you rate the content of this training? 1 2 3 4 5

7. Was the presenter well prepared and knowledgeable? 1 2 3 4 5

8. Was the training an enjoyable experience? 1 2 3 4 5

9. The most valuable part of the training to me was _____

10. The parts of the training that worked well were _____

11. The parts of the training that could be improved are _____
