

COURSE EVALUATION FORM – TRAINING COURSE

TRAINING COURSE _____
 Date _____ Place _____
 NAME AND SURNAME (Optional) _____
 OCCUPATION _____

RATING SCALE: 1 = MINIMUM VALUE 5 = MAXIMUM VALUE

RATING OF THE TRAINING COURSE'S CONTENTS

CONGRUENCE OF THE TRAINING COURSE'S CONTENTS COMPARED TO THE OBJECTS WRITTEN IN THE PROGRAMME

| | | | | |
|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

MATCH OF THE TRAINING CONTENTS WITH THE ORIGINAL EXPECTATIONS

| | | | | |
|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

LEVEL OF DEPTH OF THE TRAINING COURSE

| | | | | |
|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

RATING OF THE TEACHING

LEVEL OF KNOWLEDGE OF THE TEACHERS

| | | | | |
|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

RATING OF THE TEACHING STYLE

| | | | | |
|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

APPROPRIATENESS OF THE TEACHING MATERIAL AVAILABLE TO THE PARTECIPANTS

| | | | | |
|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

Rating of how roleplays provide you an adequate opportunity to practice your new skills

| | | | | |
|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

How effective was the feedback to you by the trainers

| | | | | |
|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

DEGREE OF RESPONSIVENESS BETWEEN THE PREVIOUS LEVEL OF KNOWLEDGE ON THE TOPIC AND THE CURRENT LEVEL OF KNOWLEDGE

ADJUSTMENT OF THE TEACHING MATERIAL AVAILABLE TO THE PARTICIPANTS

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|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

INCREASE OF THE PERSONAL PROFESSIONAL SKILLS RESPECT TO THE TOPICS

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|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

INTEREST OF THE TOPICS RESPECT TO THE PERSONAL TRAINING NEEDS/OCCUPATION

| | | | | |
|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

How well do you feel prepared to go forward as a mediator after this course

| | | | | |
|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

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ORGANIZATION AND SERVICES

REPERIBILITY AND COMPLETENESS OF THE INFORMATIONS ABOUT THE TRAINING COURSE

| | | | | |
|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

ORGANIZATION OF THE LOGISTIC (COMFORT OF THE SPACES, ACCESS EASILY TO THE ROOM)

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|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

ADJUSTMENT OF THE AVAILABLE EQUIPMENT

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|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

STAFF'S ASSISTANCE (NOT THE TEACHERS)

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|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

COMMENTS AND SUGGESTIONS TO IMPROVE THE QUALITY OF THE SERVICES
