ANNEX B.

Training Workshop Evaluation

TRAINING WORKSHOP EVALUATION

PLEASE PROVIDE US SOME BASIC INFORMATION.

1. *Name of local government unit:*

_____

2. *Your agency/institution:*

_____

3. *Position in the agency:*

_____

4. *Highest completed educational attainment:*

_____

INSTRUCTIONS:

WE HAVE JUST COMPLETED THIS TRAINING-WORKSHOP. Now we would like you to tell us about your feelings on what has been conducted. This information is valuable in helping us make following training sessions more interesting and useful to you. Below you will find a number of questions dealing with the just completed training-workshop session. Most questions can be answered by encircling a number on the scale to the right of the question. Where a written answer is required, please print your reply clearly in the space provided. Please consider your responses carefully and answer truthfully. Everything you say will be held in strictest confidence. The information will be used only to help us make this training-workshop more responsive to your

I. CONTENT

1. Relevance of the topic to your job	*Not relevant* 1	2	3	4	*Very relevant* 5
2. Clarity of the session 's objectives	*Not clear* 1	2	3	4	*Very Clear* 5
3. Level of instruction	*Too basic* 1	2	3	4	*Too advanced* 5
4. Lecture coverage	*Inadequate* 1	2	3	4	*Very comprehensive* 5
5. Time Allotment	*Too short* 1	2	3	4	*Too long* 5
6. Emphasis on details	*Too brief* 1	2	3	4	*Too detailed* 5
7. Organization an d direction	*Disorganized* 1	2	3	4	*Well-organized* 5

8. *Additional remarks you may have on these or other aspects of the content of this training-workshop:*

_____

_____

_____

II. TEACHING AIDS AND HANDOUTS

9. Effectiveness of teaching aids (general reaction) in helping you learn	*Not effective* 1	2	3	4	*Very effective* 5
10. Readability of _____*	*Not readable* 1	2	3	4	*Very Readable* 5
11. Clarity of message of _____*	*Not clear* 1	2	3	4	*Very clear* 5
12. Appeal of _____*	*Not appealing* 1	2	3	4	*Very appealing* 5
13. Usefulness of_____*	*Useless* 1	2	3	4	*Useful* 5
14. Organization and direction	*Disorganized* 1	2	3	4	*Well organized* 5

15. *Additional remarks you may have on these or other aspects of the teaching methods, aids and handouts used in this training-workshop:*

_____

_____

_____

_____

(* *You can insert the names of the instructional aids, handouts, power point slides you use in the training.*)

III. SPEAKER/ FACILITATOR'S EFFECTIVENESS

15. Mastery of the subject matter	*Not Knowledgeable* 1	2	3	4	*Very knowledgeable* 5
16. Ability to relate topic to your individual work situation	*Very poor* 1	2	3	4	*Excellent* 5
17. Ability to arouse and sustain interest	*Very poor* 1	2	3	4	*Excellent* 5
18. Openness to ideas of participants	*Did not encourage* 1	2	3	4	*Encouraged* 5
19. Encouraged trainee participation	*Useless* 1	2	3	4	*Useful* 5
20. Time management	*Very poor* 1	2	3	4	*Excellent* 5
21. Clarity of speech	*Not clear* 1	2	3	4	*Very clear* 5
22. Personal appearance	*Very poor* 1	2	3	4	*Excellent* 5

23. *Additional remarks you may have on these or other aspects of the trainer/facilitator:*

_____
_____
_____

IV. GENERAL

1. Please state the three most important ideas/concepts that you learned from this training-workshop._____
_____
_____

2. What did you like least about the training-workshop?
_____
_____

3. Suggestions to improve the training-workshop.
_____
_____

V. LOGISTICS

	1 Very poor	2 Poor	3 Passable	4 Good	5 Very Good
1. Quality of the meals	_____	_____	_____	_____	_____
2. Quality of your accommodations	_____	_____	_____	_____	_____
3. Suitability of the workshop hall	_____	_____	_____	_____	_____
4. Contacts with training staff	_____	_____	_____	_____	_____
5. Others (Pls. specify)	_____	_____	_____	_____	_____

Please use the space below to write down any suggestions you might have that will help us to improve the facilities and services of the training-workshop venue.