

EVALUATION FORM



SMACNA Chapter: _____

Name: _____

Course Date: _____

Productivity and Time Management/Action Planning

YOUR COMMENTS ON THIS COURSE WILL CONTRIBUTE TO IMPROVING THE COURSE.

1. On a scale of 1-4 (with four being the highest), please circle the following:

	(lowest)			(highest)
A. Usefulness of the course materials during the session:	1	2	3	4
B. Instructor's knowledge of the subject matter:	1	2	3	4
C. Instructor's ability to communicate the subject matter:	1	2	3	4
D. To what extent did the course meet your expectations?	1	2	3	4
E. Overall, how would you evaluate this program?	1	2	3	4

Questions:

2. What was the *most useful* section(s) you found in the course?

3. What was the *least useful* section(s) of the course (if any)?

4. List additional information you would like covered in this course and/or topics of interest for future Supervisory Training Programs.

5. Please provide a statement of today's experience for marketing purposes.

*Please use the back of this form for any additional comments.
Thank you for your input.*