

Instructor Evaluation Form

Instructor's Name: _____

Course Title: _____

Course Date: ____ / ____ / 20__

Course Location: _____

In order to provide an exceptional experience and make necessary improvements to this course, we kindly ask you to provide informative and detailed feedback on this instructor's performances, class process and material reviewed during the training you attended.

Please see below and provide as much detail as possible for the following categories:

1.) INSTRUCTOR: (How prepared was the instructor, was the instructor knowledgeable of the subject matter, did the instructor sufficiently relay the material in an appropriate manner, were all course objectives reviewed, what could the instructor have done better?)

2.) CLASS PROCESS: (Did the class meet your expectations, how easy was it to register for the class (if applicable), was this training worth your invested time, was the time allotted for the course appropriate, what could have made your experience better?)

3.) MATERIAL: (what aspects of the training were most beneficial, was the material sufficient enough to provide you a clear understanding of the subject matter, could the material be presented differently, was the material up to date and easy to learn?)
