



Employee Development Branch Course Evaluation

***Employee Development Branch would like to hear from you!
Your feedback is very important to our trainers and our planning process.***

Course Name:
Course Length: day
Course Date(s):
Number of Course Participants:
Number of Evaluations Submitted:

Instructor & Course Feedback		Strongly Agree		Agree		Disagree		Strongly Disagree		N/A	
			%		%		%		%		%
1.	The instructor was well organized and knowledgeable of the content		%		%		%		%		%
2.	The instructor communicated clearly and clarified points when necessary.		%		%		%		%		%
3.	The instructor encouraged discussion & questions.		%		%		%		%		%
4.	The activities were useful learning experiences.		%		%		%		%		%
5.	The instructor related course material to work situations.		%		%		%		%		%
6.	The course met its identified learning objectives.		%		%		%		%		%
7.	The material was presented at a pace that was	Too Fast		Just Right		Too Slow					
			%		%		%				

8. **How will you be able to use what you learned in your work, at home, and/or in your personal life?**
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9. **How could the course be improved?**
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10. **What types of courses would you like to see offered through Employee Development Branch and the E-Learning Centre?**
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11. **Additional Comments:**
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Thank you for taking the time to complete this evaluation.