

Delta Region AETC Evaluation of a Training Session

Date: _____ Program ID number: _____

Title of program: _____

Presenter(s): _____

Question - <i>Before the training session</i>	Excellent=4	Good=3	Fair=2	Poor=1	NA
How would you rate your level of knowledge about the topic of this session?					

Question - <i>After the training session</i>	Excellent=4	Good=3	Fair=2	Poor=1	NA
The program met its objectives?					
The teaching methods were effective?					
The physical environment was conducive to learning?					
The level of presentation/training was appropriate for the audience?					
Now, how would you rate your level of knowledge about this topic?					
Overall, the presenters were...?					
How would you rate the overall quality of the program?					
Question – How you will use the information in the training:	Very much=4	Some what=3	A little=2	Not at all=1	NA
The program will change the way that I provide services to people with HIV.					
I can apply the information learned in the session to my practices/service setting.					

Opinions	
What did you like most about this program?(150 characters max., please)	
What did you like least about this program?(150 characters max., please)	
Comments:(200 characters max., please)	