

PARTICIPANT FEEDBACK QUESTIONNAIRE

Event Title: _____ **Date:** _____

Participant Name: _____ **(please print)**

I hope that you enjoyed your training with me.

To ensure the best possible standard of quality in training delivery, I invite you to provide feedback on your experience of this event.

Thank you so much for providing feedback and constructive comments where indicated.

I do value your feedback and we can guarantee that I do look very carefully at your comments and act on the feedback.

For each statement overleaf, please tick as appropriate.

Thank you for your time, your feedback will assist me in constantly improving the learning experience of this training.

Please complete and email this to maria@mariapellicano.com

SECTION 1

CONTENT	YES	NO	COMMENT
The content of the session was appropriate to my needs and will assist me to achieve my goals			
The length of the session was appropriate to my needs			

TRAINER'S ABILITY	YES	NO	COMMENT
The trainer's knowledge in the subject matter clearly contributed to a positive learning experience			
The trainer presented in a manner that supported my learning ability			
The trainer encouraged questioning and provided responses accordingly			

YOUR CONTRIBUTION	YES	NO	COMMENT
I feel that I was as much part of the session as the other delegates			
I feel that my comments were acknowledged by the trainer			
I feel that my questions were answered well			

SECTION 2

OVERALL IMPRESSION	YES	NO	COMMENT
I enjoyed the session			
The outcomes met all my expectations			
The session was challenging and interesting			
I would recommend this training to others			

What more can be done in respect of this training?

What I loved about this training?

Testimonial for future marketing purposes:

Your details are provided for further professional development and/or testimonial for marketing purposes.

Mobile contact details: _____

Email contact details: _____

Please complete and email this to maria@mariapellicano.com