



Course Title: Date:

Your Name: Your Phone No:

Your Organisation: Instructor Name:

Your Email Address:

THE COURSE:

	← Strongly Agree	Agree	Strongly Disagree →
It taught you new concepts?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It moved at an acceptable pace?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It met your expectations?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was relevant to your objectives?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

THE INSTRUCTOR:

Had good product knowledge?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explained concepts well?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Balance of theory / practical good?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Presented the subject well?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Opportunities to participate?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Good communicator?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FACILITIES / MATERIALS:

Venue was comfortable and appropriate?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment was suitable?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Refreshments / breaks good?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Documentation provided suited?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please give your rating for this course out of 10: (10 being the highest) / 10

Please add any general comments:

Andrew customised this course to suit our particular needs at BAE. You made the course interesting for two days solid and solved every requirement for us. Thank you Andrew.

Are there any other courses you would be interested in?

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