

### **P C Users Group(ACT) Inc - COURSE EVALUATION - Trainer**

Your answers to the following questions will enable us to provide better Training Services.

Name of Course: .....

Date of Course: .....

Name of Trainer:.....

#### **Course Objectives**

Do you feel the course met the objectives set out in the Course Notice as you desired?.....  
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#### **Training Venue**

Was the software installed correctly?.....

Were all computers functional? .....

Were aids available (projector, audio, whiteboard markers etc)?.....

Was the room temperature comfortable? .....

Were refreshments (tea, coffee, milk, sugar, biscuits) available?.....

Were the room, the equipment and the furniture all clean?.....

Was lighting in the room and access areas satisfactory?.....

Was access satisfactory and safe? .....

Comment: .....

.....

#### **Training Material**

What training materials did you use?

self-paced     trainer prepared     other PCUG prepared     other

Comment on quality and suitability: .....

.....

#### **Students**

How many students attended? .....Failed to attend? .....

Did all students have the needed prior knowledge?.....

Were there any problems with any student you think we should know about?.....

.....

Comment: .....

#### **Coordination**

Were you made aware of the Volunteer Information on the PCUG website?.....

Did the Training Co-ordinator contact you to check requirements before the course?.....

Did you find out about the number of students in good time? .....From whom?.....

Did you have sufficient information? (eg. passwords, work file areas on disk clearly indicated).....

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Did you receive any expected course material? ..... Was it timely?.....

Was communication with your co-ordinator effective? .....

Do you see any problems the training team or the Committee should know about? .....

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**Honorarium:** If you wish to claim the honorarium please provide your Bank details for direct deposit:

Bank: ..... BSB: .....

Account N°:..... Account Name:.....