

OSHA 10/30 Class Evaluation

Trainer Name: _____

Course Name: _____

Course Dates: _____

Course: <i>Please complete the following statements about the course by marking the appropriate box with an X.</i>	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
The course objectives were clearly explained.					
The classroom environment was favorable to learning.					
Course materials were well organized and easy to understand.					
Information was timely and current.					
This educational experience will help me to do my job better.					
I would recommend this course to others in my field.					

Trainer: <i>Please complete the following statements about the trainer by marking the appropriate box with an X.</i>	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
The trainer demonstrated thorough knowledge of the subject.					
The trainer was prepared and organized.					
The trainer provided useful, real world examples.					
The trainer involved participants in activities and discussions.					
The trainer presented information in a clear, understandable manner.					

Additional Comments (Include what was most valuable about class; did time allotted meet course objectives; suggestions for improvement, etc.):