Child Support Training – Course Evaluation

DCSS 0359 FRONT (05/04/04)

This form is used to collect participant evaluations of all DCSS-certified training courses. The information that you furnish is used by both the Certified Trainers and by DCSS to ensure that the training provided is of the highest quality. Please give complete and candid answers to all questions.

Course Title _____

Course Date(s) _____

Trainer(s)/Presenter(s) _____

LCSA _____

Region _____

Current Classification _____

How long have you worked in Child Support? _____

◆ *Using the scale below, indicate the extent to which you agree with each of the statements that follow. Please provide any additional comments on the lines provided.*

	Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
1. The course goals and objectives were clearly defined.	☐	☐	☐	☐	☐	☐

_____

	Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
2. The course goals and objectives were met.	☐	☐	☐	☐	☐	☐

_____

	Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
3. The exercises and "learn by doing" activities helped me increase my knowledge and improve my skills.	☐	☐	☐	☐	☐	☐

_____

	Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
4. The training aids, such as handouts, audio or visual presentations, participant guide, etc., assisted or enhanced my learning.	☐	☐	☐	☐	☐	☐

_____

	Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
5. The material was logically sequenced and easy to follow.	☐	☐	☐	☐	☐	☐

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	Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
6. The material was written at a level which I could easily understand.	☐	☐	☐	☐	☐	☐

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	Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
7. The course gave me a good working knowledge of the subject and practical skills to perform my job.	☐	☐	☐	☐	☐	☐

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8. What do you feel was the most useful skill/information presented?

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9. What would have made this course more effective?

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_____

10. Do you have any additional comments?

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Thank you for taking the time to complete this evaluation. Your input is valuable and helps us plan future training programs.

_____

Name *(optional)*