

Southwest Safety Training Alliance
Focus Four and Other Construction Hazards
Susan B. Hardwood
Training Evaluation

Date: ___/___/___ (of training) Instructors name: _____

Do you understand this training is a review of selected Focus Four Hazards as identified by OSHA.

Overall Rating: **Excellent** **Good** **Fair** **Poor**

1. Was the course content what you expected? Yes___ No___

2. Were the subjects presented clearly? Yes___ No___

3. Was the facility location adequate? Yes___ No___

4. Has this course enhanced you safety awareness? Yes___ No___

5. What subjects were most beneficial to you?

6. What subjects would you like additional training on?

7. Any comments to enhance you training experience?

8. How will this training help at your jobsite?

Optional:

Name: _____ Employer: _____