



TFS OUT-OF-STATE TRAINING EVALUATION FORM

Name: _____

Training Attended: _____

Location: _____ Date(s): _____

In order to gauge the effectiveness of training that employees attend outside of Texas, we ask that you please provide feedback on the items listed below. If more room is needed, you may attach additional pages.

Registration Process (Was enough information given leading up to your training?)

- Exceeded my Expectations Fulfilled my Expectations Failed to Meet my Expectations

Comments _____

Travel (Consider travel method, directions provided, lodging, meal availability, locations, etc.)

- Exceeded my Expectations Fulfilled my Expectations Failed to Meet my Expectations

Comments _____

Instructor(s) (Consider knowledge of the subject, experience, instructing style, etc.)

- Exceeded my Expectations Fulfilled my Expectations Failed to Meet my Expectations

Comments _____

Course Content (Was the course an effective use of your time, and did the course meet your expectations?)

- Exceeded my Expectations Fulfilled my Expectations Failed to Meet my Expectations

Comments _____

Would you recommend this training to others? Why or why not?

Additional Comments:

