



Training Evaluation for Trainees

Title of Training: HCUJSKDCV

Date: June 30, 2024

Name of Trainee: ABC

Facilitator: MS. KYT

Instruction: Please put a ✓ on the box for your rating.

| TOPIC: EMPLOYEE KRA | UNSATISFACTORY | NEEDS IMPROVEMENT | SATISFACTORY | VERY SATISFACTORY | OUTSTANDING |
|-------------------------------|----------------|----------------------|--------------|----------------------|-------------|
| Understanding of Key Concepts | | | | ✓ | |
| Retention of Information | | | | ✓ | |
| Contribution to Discussion | | | | ✓ | |
| Participation in SLEs | | | | ✓ | |
| Receptive to Feedback | | | | ✓ | |
| Assessment Score | | | | ✓ | |

| TOPIC: PROCESS BEHAVIOR | UNSATISFACTORY | NEEDS IMPROVEMENT | SATISFACTORY | VERY SATISFACTORY | OUTSTANDING |
|-------------------------------|----------------|----------------------|--------------|----------------------|-------------|
| Understanding of Key Concepts | | | ✓ | | |
| Retention of Information | | | ✓ | | |
| Contribution to Discussion | | | ✓ | | |
| Participation in SLEs | | | | ✓ | |
| Receptive to Feedback | | | ✓ | | |
| Assessment Score | | | ✓ | | |