



TRAINING EVALUATION FORM

Training Date: 2025-02-07 10:34:00
Training Title: TRAINING MODULE DEVELOPMENT
Facilitator: Mr. Gino Paulo Mah

Please complete the evaluation form for todays training session. Kindly tick off your level of agreement with the listed statement below.

	Strongly Agree	Agree	Disagree	Strongly Disagree
Please Rate the Following:				
FACILITATOR				
was well prepared	✓			
encouraged active participation from the group	✓			
knowledge of the subject matter	✓			
ability to explain and illustrate concepts	✓			
PRESENTATION				
objectives of the training were clearly defined	✓			
content was organized and easy to follow	✓			
topics covered are relevant	✓			
training will be useful in my work	✓			
TRAINING				
objectives of the training was met	✓			
time allotted for the training was sufficient		✓		
venue provided a comfortable setting for learning	✓			

What did you like about the training?
- It taught us how to design and implement our own training and development programs for our team members, guiding us on how to specifically enhance their skills and knowledge.

How well this training sessions help you achieve your career goals in the future?
- Once all the trainings are done, we expect improvements in the knowledge, skills and attitude of every team member.

What are the changes you can practice as a result of this training?
- Particularly, the way we present the products and how we negotiate better with our customers.

What exercises were most effective in helping you understand the subject of this training program? Why?
- Mind mapping and how to organize the thoughts. It helps us organize our thoughts visually, making it easier to understand and remember.

What aspect of the training could be improved?
- More practice exercises.