



TRAINING EVALUATION FORM

Training Date: 2024-07-10 08:00:00
Training Title: GOOD WAREHOUSE PRACTICE
Facilitator: RICHARD M. RASCO

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?
- the knowledge that it defines how importance is GWP and how it affects our service through our customer.

How well this training sessions help you achieve your career goals in the future?
- THE GWP HELPS ME UNDERSTAND THE IMPORTANCE OF PROPER HANDLING OF ITEMS AND THE SOP NEEDED TO FOLLOW IN THE WAREHOUSE BECAUSE IT AFFECTS OUR SERVICE TO OUR CUSTOMER.

What are the changes you can practice as a result of this training?
- PROPER HANDLING OF ITEMS ON WAREHOUSE

What exercises were most effective in helping you understand the subject of this training program? Why?
- THE EXAM ON HOW I UNDERSTAND THE TRAINING.

What aspect of the training could be improved?
- TRAINING IS GOOD. NO IMPROVEMENT IS NEEDED FOR ME.