

**NWREC #2 Regional
TRAINING EVALUATION FORM**

Date: _____ Time: _____ Sites Served: _____

Training Title: _____ Trainer: _____

PLEASE INDICATE YOUR LEVEL OF AGREEMENT WITH THE FOLLOWING STATEMENTS BY CHECKING THE APPROPRIATE BOX:

<i>About the Satellite Distance Learning Process:</i>	Strongly Agree (5)	Agree (4)	No Opinion (3)	Disagree (2)	Strongly Disagree (1)
1. I believe participants received as much information as they would have in a regular <i>in-person</i> training.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. The technology did <i>not</i> interfere with the quality of this training.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. I believe participants were able to interact:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(a) with <i>me</i> as much as they wanted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(b) with <i>each other</i> as much as they wanted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I did not miss the face-to-face contact experienced in a regular training.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Without access to Satellite System, it would be difficult to deliver these services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Delivering trainings through the Satellite System saves travel time in my work week. If yes, please provide your current <i>estimate</i> of average time saved this week: _____ hrs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. I would willingly use the Satellite System again.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Overall, I was satisfied with how this training went.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Which of the following best reflects your level of satisfaction with the service received? (Circle one!)	Highly Satisfied	Satisfied	Somewhat Satisfied	Not at all Satisfied
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Please explain any *Disagree* or *Strongly Disagree* responses, and/or provide comments on other side of page if needed.

Thank you for your time!