Name of Trainee: _____ **Date of Course/Seminar:** _____

Name of Course/Seminar: _____ **PDU:** _____

……

A. Course Evaluation (by Trainee):

Please respond to the following statements by marking a tick (√) in the appropriate box:
1 – Strongly Disagree 2 – Tend to Disagree 3 – No Clear Opinion 4 – Tend to Agree 5 – Strongly Agree

1. Course Contents & Materials
   - (i) The concepts presented in the course are useful and relevant ☐1 ☐2 ☐3 ☐4 ☐5
   - (ii) The course material is directly relevant to my job ☐1 ☐2 ☐3 ☐4 ☐5

2. Course Facilitator(s)
   - (i) The presentation is systematic and well prepared ☐1 ☐2 ☐3 ☐4 ☐5
   - (ii) The trainer is able to generate interest and participation ☐1 ☐2 ☐3 ☐4 ☐5
   - (iii) The trainer is able to give practical examples ☐1 ☐2 ☐3 ☐4 ☐5

3. Participants
   - (i) As a learner, the course has met my expectations ☐1 ☐2 ☐3 ☐4 ☐5
   - (ii) I am able to put what I have learnt into practice ☐1 ☐2 ☐3 ☐4 ☐5
   - (iii) Main points/new ideas learnt from the course:

     _____

     _____
   - (iv) My suggestions for improvement:

     _____

     _____
   - (v) Overall rating of the course: ☐1 ☐2 ☐3 ☐4 ☐5

     Please respond by marking a tick (√) in the appropriate box:
     1 – Very Poor 2 – Poor 3 – Average 4 – Good 5 – Excellent
   - (vi) Suggested topic(s) to be shared with colleagues:

     _____

     _____

(vii) Mode of knowledge sharing with colleagues:
Please mark a tick (√) in the appropriate box:

☐ Conduct briefing

☐ Arrange supplier to conduct in-house training

☐ Others
Please specify: _____

For HR Use		
Acknowledged for follow-up action.		
Name:	Signature:	Date:

4. Course Materials to be extended to Library
Please mark a tick (√) in the appropriate box.

Type of Material:

☐ Hard Copy ☐ Soft Copy/CD

For Library Use		
Please mark a tick (√) in the appropriate box. ☐ Acknowledgement of receipt.		
Name:	Signature:	Date:

B. Evaluation On Trainee by Immediate Supervisor:
Please mark a tick (√) in the appropriate box.

☐ Effective / ☐ Not Effective

Comments:

_____

_____

Name: _____

Signature: _____

Date: _____