

WV STARS Registered Training Evaluation Summary

WV STARS Trainer must keep either originals of Training Evaluations or Training Evaluation Summary for three years. WV STARS may request evaluations or evaluation summary at any time for review.

Title of Training:	
Presenter(s) Name:	
Training Registration Number:	Trainer's Registry ID #:
Training Date:	County:
Number of Attendees:	Number of Evaluations:

Training Content	Strongly Agree	Agree	Disagree	Strongly Disagree
I gained knowledge and/or skills.				
Total:	%	%	%	%
The training met my expectations.				
Total:	%	%	%	%
The materials distributed were useful.				
Total:	%	%	%	%
I plan to change or enhance my work style/program in response to this training.				
Total:	%	%	%	%

Trainer	Strongly Agree	Agree	Disagree	Strongly Disagree
Trainer was engaging and friendly.				
Total:	%	%	%	%
Trainer was professional.				
Total:	%	%	%	%
Participation and interaction were encouraged.				
Total:	%	%	%	%
Overall rating of trainer.				
Total:	%	%	%	%

	Strongly Agree	Agree	Disagree	Strongly Disagree
Overall, I was satisfied with the training.				
Total:	%	%	%	%

What part of the training was most useful?

How could the training be improved?

Additional comments: