

EVALUATION FORM



Date of Evaluation: _____

Subject Title: _____

Name of Trainer: _____

Please tick only 1 box per question.

(5 - Strongly agree 4 - Agree 3 - Neutral 2 - Disagree 1 - Strongly Disagree)

EFFECTIVES OF TRAINING PROGRAMME

- 1) The subject was covered adequately according to the syllabus given.
 5 4 3 2 1
- 2) The knowledge gained was practical and useful.
 5 4 3 2 1
- 3) The handouts and other course materials were designed and organised to aid understanding.
 5 4 3 2 1
- 4) There was appropriate use of class and case discussions, examples, etc. to help in understanding the subject matter.
 5 4 3 2 1

EFFECTIVENESS OF TRAINER

- 5) The trainer was well prepared and organised for the lectures.
 5 4 3 2 1
- 6) The trainer demonstrated competency in the subject matter.
 5 4 3 2 1
- 7) The trainer was able to communicate ideas and concepts clearly.
 5 4 3 2 1
- 8) The trainer used practical examples and/or demonstrated an understanding of practical issues.
 5 4 3 2 1
- 9) The trainer was able to maintain interest and encourage participation.
 5 4 3 2 1

EFFECTIVENESS OF FACILITIES

- 10) Your overall rating as to whether the facilities were conducive to learning
 5 4 3 2 1

STUDENT SUPPORT & SERVICES

- 11) Course announcements and information given to students were clear and helpful.
 5 4 3 2 1
- 12) Programme administrative staffs were courteous and helpful.
 5 4 3 2 1

OTHER COMMENTS/SUGGESTIONS (IF ANY)

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