

Laboratory Energy Safety Protocol Training Evaluation

Participant Information

Name

Department

Date

Training Evaluation

How well did you understand the training content?

☐

Poor

☐

Fair

☐

Good

☐

Excellent

Instructor effectiveness

☐

Poor

☐

Fair

☐

Good

☐

Excellent

Relevance of material to your work

☐

Poor

☐

Fair

☐

Good

☐

Excellent

Opportunities for questions and participation

☐

Poor

☐

Fair

☐

Good

☐

Excellent

Comments & Suggestions

Please provide any additional comments or suggestions to improve this training:

Signature

Date