

Training Session Communication Evaluation Form

Participant Name

Session Title

Trainer Name

Date

1. Were the objectives of the training communicated clearly?

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5

2. Was the content delivered in an understandable manner?

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5

3. Was the trainer responsive to questions and feedback?

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5

4. How effective was the communication style of the trainer?

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5

5. Any suggestions for improving communication in future sessions?