

Foster Parent Training Session Evaluation

Name (Optional)

Date of Session

Trainer/Facilitator

Session Title/Topic

Session Evaluation

The training objectives were clearly defined

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1 = Strongly Disagree 5 = Strongly Agree

The content was relevant and useful

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1 = Strongly Disagree 5 = Strongly Agree

The trainer demonstrated knowledge and preparation

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1 = Strongly Disagree 5 = Strongly Agree

The pace and structure of the training were appropriate

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1 = Strongly Disagree 5 = Strongly Agree

I feel better prepared as a foster parent after this session



1 = Strongly Disagree 5 = Strongly Agree

What did you find most valuable in this training?

Suggestions for improvement

Topics you would like in future trainings