Evaluation

Date: _____ Location (City): _____

Self-Assessment of Knowledge and Skills

Please review the following list of knowledge and skills statements. Give some thought to what you knew before this training and what you learned here today. Circle the number that best represents your knowledge and skills **before** and **after** this training.

Before Training					Rating Scale: 1 = Low 3 = Medium 5 = High	After Training				
1	2	3	4	5	I can summarize what case management means when working with W-2 participants with multiple barriers.	1	2	3	4	5
1	2	3	4	5	I can use assessment results to help W-2 participants with multiple barriers reach their program goals.	1	2	3	4	5
1	2	3	4	5	I can demonstrate engagement techniques that assist W-2 participants with multiple barriers to reach self-sufficiency.	1	2	3	4	5

Comments:

Course Material Evaluation

Please rate the following statements using a 1 through 5 scale where:

1 = Disagree Strongly   5 = Agree Strongly

Statement	Rating				
This course was excellent and of value to my professional development.	1	2	3	4	5
The activities, exercises and examples were realistic and aided in my learning.	1	2	3	4	5
The material covered in this course was relevant to my day-to-day job functions.	1	2	3	4	5
The feedback, strategies and other ideas that I received today will be useful to my case management practices when I return to my agency.	1	2	3	4	5
I was well engaged with what was going on during the program.	1	2	3	4	5
As a result of this training, I feel more confident in my capacity to work with W-2 Participants.	1	2	3	4	5

Comments:

Trainer(s) Assessment

Please rate this training in terms of Trainer's Expertise, Clarity, Time Management and Ability to Answer Questions. Provide any additional feedback in the Comments section. Circle the appropriate numbers.

Rating Scale: 1 = Low   3 = Medium   5 = High

Expertise	1	2	3	4	5
Clarity	1	2	3	4	5
Time Management	1	2	3	4	5
Ability to Answer Questions	1	2	3	4	5
Comments:					

Additional Feedback

Please take a moment to answer the following questions. Your comments are an important contribution as we create and update trainings to meet your professional needs.

- What do you feel were the **strengths** of this training?

- What do you feel were the **weaknesses** of this training?

- How can we **improve** this training?

- From what you learned, what will you be able to **apply** on your job?

- What **additional** training would be valuable to you related to this topic?