

State-Approved Training Evaluation Form

Training Title:		Date:	
Trainer Name:		Trainer STARS ID:	

Instructions: Please mark only one response per line.	Strongly disagree	Disagree	Agree	Strongly agree
Content provided matched the training description.	1	2	3	4
Content provided matched the core competency level indicated in the training description.	1	2	3	4
Examples and illustrations used in the training were relevant to practice.	1	2	3	4
Handouts were useful.	1	2	3	4
Trainer was knowledgeable about the topic.	1	2	3	4
Trainer was well prepared.	1	2	3	4
Content and methods of instruction honored my learning style and culture.	1	2	3	4
Trainer was able to present the material using alternative methods, when needed.	1	2	3	4
Trainer clearly and completely addressed questions.	1	2	3	4
Training facilities were conducive to learning.	1	2	3	4
As a result of training, my knowledge about the topic is enhanced.	1	2	3	4
As a result of training, I can think of way(s) to enhance my work with children and/or families.	1	2	3	4
I can apply this information to the diversity of families I serve.	1	2	3	4
I was invested in learning from this training.	1	2	3	4
I would certainly recommend this training to my colleagues.	1	2	3	4

Comments		
1. What parts of the training worked best for you?		
2. What changes would you suggest to the trainer?		
3. For future training, what topic(s) are you looking for? (Select your top three choices)		
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <p><u>Early Care & Education Core Competency Areas :</u></p> <ul style="list-style-type: none"> <input type="radio"/> Child Growth, Development & Learning <input type="radio"/> Curriculum and Learning Environment <input type="radio"/> Ongoing Measurement of Child Progress <input type="radio"/> Families and Community Partnerships <input type="radio"/> Health, Safety, and Nutrition <input type="radio"/> Interactions <input type="radio"/> Program Planning and Development <input type="radio"/> Professional Development and Leadership </td> <td style="width: 50%; vertical-align: top;"> <p><u>Child & Youth Development Core Competency Areas:</u></p> <ul style="list-style-type: none"> <input type="radio"/> Child/Adolescent Growth and Development <input type="radio"/> Learning Environment and Curriculum <input type="radio"/> Child/Adolescent Observation and Assessment <input type="radio"/> Families, Communities, and Schools <input type="radio"/> Safety and Wellness <input type="radio"/> Interactions with Children/Youth <input type="radio"/> Program Planning and Development <input type="radio"/> Professional Development and Leadership <input type="radio"/> Cultural Competency and Responsiveness <input type="radio"/> Youth Empowerment </td> </tr> </table>	<p><u>Early Care & Education Core Competency Areas :</u></p> <ul style="list-style-type: none"> <input type="radio"/> Child Growth, Development & Learning <input type="radio"/> Curriculum and Learning Environment <input type="radio"/> Ongoing Measurement of Child Progress <input type="radio"/> Families and Community Partnerships <input type="radio"/> Health, Safety, and Nutrition <input type="radio"/> Interactions <input type="radio"/> Program Planning and Development <input type="radio"/> Professional Development and Leadership 	<p><u>Child & Youth Development Core Competency Areas:</u></p> <ul style="list-style-type: none"> <input type="radio"/> Child/Adolescent Growth and Development <input type="radio"/> Learning Environment and Curriculum <input type="radio"/> Child/Adolescent Observation and Assessment <input type="radio"/> Families, Communities, and Schools <input type="radio"/> Safety and Wellness <input type="radio"/> Interactions with Children/Youth <input type="radio"/> Program Planning and Development <input type="radio"/> Professional Development and Leadership <input type="radio"/> Cultural Competency and Responsiveness <input type="radio"/> Youth Empowerment
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Thank you! Please leave the completed evaluation form with the trainer.