



Early Childhood eTraining

Please take a moment and complete this questionnaire. Please indicate how much you agree with the following statements below.

The information within this training was presented in a clear and concise manner.

Excellent Great Good Fair Poor

I was provided with useful information that I can use.

Excellent Great Good Fair Poor

I would recommend this training to others.

Excellent Great Good Fair Poor

I also need professional development/training in the following area(s):

One thing that was done very well was: _____

One thing that could have been improved was: _____

The following family/friends/co-workers need additional information about training:

(Please provide full name, telephone # and email addresses for each person.)

Additional information I think you should know:

Thank you for completing this questionnaire. Your opinions are very important to us.
Please mail this form to our offices within 14 business days of the conclusion of your training.