

Feedback Form

Online Oracle Apps DBA Training

Please fill in this form to provide the training team with feedback about the course:

Oracle Apps DBA
 Batch No.: 1008
 Duration: 07-12-2008 to 04-01-2009
 Name of Trainee: ADITYA R
 Your Organization Name:
 Your Designation:

Your feedback is important in helping us to increase the quality of our Online Based Training Program.

Rating	Poor	Fair	Average	Good	Very Good	Excellent	Comments
Course Content	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Training Material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Training Session	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	It was great
Hands On Session	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Hands on session was very useful, our trainer has been very accommodative in the selection of timings for the session and has been very patient in explaining all steps throughout the session.
Trainers Technical Knowledge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Trainers Presentation Style	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Speed/Length of the Course	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Voice Quality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	I did not face any problem with voice at any point of time
Response to queries	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There no words to describe the instructor, he is always available, whenever I call him or email him with a query he is very patient and adept in answering my queries.
Overall Evaluation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The course was good and our instructor and his way of explaining and handling queries was remarkable.
What you like to refer this training to your friends/colleagues?							YES

Did the Training meet your expectations?	YES
Is there anything else you would like to suggest?	I hope it would be better if we could have the access to resources in order to practise for a longer period of time and hope the instructor supports us.
Further Comments	

* Please note that all data is collected anonymously and there is no link to your identity, organisation or location.