

Feedback Form

Online BI Publisher Training

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

Batch No.: 1004

Date: 25-July-2009

Name of Trainee: Dilpesh Patel

Your Organization Name: Aarmon Consulting Ltd

Your Designation:

Your feedback is **very important** to us. Please enter “**Y**” in relevant boxes below

Rating	Poor	Fair	Average	Good	Very Good	Excellent	Comments
Course Content	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Training Contents/Scope Covered	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Training Session Quality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Speed/Length of the Course	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Voice Quality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Response to queries	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Always ready to take questions and answer promptly
Overall Evaluation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The trainer was very good. All the staff at focus thread have been excellent. Would do another course.
Would you refer this training to your friends/colleagues?							Yes- The course was very good and well paced the trainer was excellent. She knew her subject very well. Good style of presentation.
Did Training meet your expectations?							Yes it met my expectations
Can we use your feedback to help marketing our future trainings [Yes/No]? If you wish, we will keep this feedback anonymous							Yes – please keep anonymous