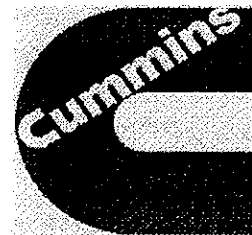


COURSE TITLE:
COURSE DATE:
INSTRUCTOR:
YOUR NAME:
YOUR COMPANY:



COURSE EVALUATION

Catagories	
Taking A Class	Rating
The location was easy to find?	
There was adequate parking?	
The staff was helpful and courteous?	
The classroom was comfortable for learning?	
Course Content, Format, Material	
Focused on objectives that are useful in my job?	
Included the appropriate amount of hands-on practice scenarios?	
Materials were up to date and easy to follow?	
Instructor	
Knew the subject matter?	
Was easy to understand?	
Understood the audience and held my attention?	
Was skilled in listening and questioning?	
Gave straightforward and honest answers?	
Encouraged participation throughout the class?	
Stayed focused on class objectives?	
Overall Satisfaction	
How satisfied are you with the class?	
How satisfied are you with the instructor?	
Are you satisfied that this class was time well spent?	
After Taking This Class, You Would:	
Apply the skills taught in this class?	
Use the class materials in your job?	
Recommend this class to others?	

EXCELLENT = 5
 VERY GOOD = 4
 SATISFACTORY = 3
 FAIR = 2
 POOR = 1

Please use the space below to write down any comments that you may have that are not covered in the above survey. (Use reverse side if necessary)

TOTAL POINTS _____

Cummins Crosspoint, LLC
 Training Center
 4301 West Morris St.
 Indianapolis, IN 46241
 Attn: Don Wier
 Training Manager

