



## Staff Training Evaluation

<b>COURSE ATTENDED:</b>		
<b>COURSE PROVIDER:</b>		
<b>LOCATION:</b>		
<b>DATE/TIMEFRAME:</b>	From (mm/yyyy)	To (mm/yyyy)
<b>ATTENDEE(S):</b>		
<b>COURSE SUMMARY:</b>	<i>Enter here a brief outline of the course, to include its aims, content and certification, if any</i>	
<b>QUALIFICATION:</b>	<i>Enter here the qualification or certification received, if any</i>	
<b>COURSE EVALUATION:</b>	<i>Enter here a description of your evaluation of the course, to include how it met your needs and its benefit and/or relevance for the college</i>	

**Submitted by:** \_\_\_\_\_

**Date:** \_\_\_\_\_