

**Elizabeth City State University
Title III/SAFRA
Training Evaluation Form**

Thank you for attending our Title III/SAFRA Project Staff Meeting. We trust that this session provided effective strategies to assist you in the management of your Title III/SAFRA activities. Please complete this evaluation form to assist us in planning future training sessions.

Date of Training Session- _____
Topic of Training Session- _____
Presenter(s)- _____

1. The training session provided detailed information that is useful.
 Strongly Agree Agree Neutral Disagree Strongly Disagree
2. The training session was well organized and met my expectations.
 Strongly Agree Agree Neutral Disagree Strongly Disagree
3. The presenters were knowledgeable about the training topic and provided helpful interaction with the audience.
 Strongly Agree Agree Neutral Disagree Strongly Disagree
4. The Title III/SAFRA staff was/is responsive to my needs.
 Strongly Agree Agree Neutral Disagree Strongly Disagree
5. The duration of this training session was about right.
 Strongly Agree Agree Neutral Disagree Strongly Disagree
6. I know where to go to obtain additional information about this training subject.
 Strongly Agree Agree Neutral Disagree Strongly Disagree
7. Additional comments (please include any training topics you would like to see covered in the future):
