**PROGRAM EVALUATION TOOL**

|  |  |  |  |  |  |  |  |  |  |  |  |
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| **Respondent Type:** | | | **☐** | **Trainee** | **☐** | **Trainer** | **☐** | | **Program Manager** | | |
| **Name:** |  | | | | | | | **☐** | **Male** | **☐** | **Female** |
| **Program Title:** | |  | | | | | | | **Date:** | Click here to enter a date. | |

***Directions:*** *Please assess the effectiveness of the training program according to the indicators below. Put a tick/check (/) under the appropriate column.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| After the conduct of the training program, I believe that… | Strongly Agree | Agree | Disagree | Strongly Disagree |
| 1. **Program Management** |  |  |  |  |
| 1. the training program was delivered as planned | **☐** | **☐** | **☐** | **☐** |
| 1. the training program was managed efficiently | **☐** | **☐** | **☐** | **☐** |
| 1. the training program was well-structured | **☐** | **☐** | **☐** | **☐** |
| 1. **Attainment of Objectives** |  |  |  |  |
| 1. the program objectives were clearly presented | **☐** | **☐** | **☐** | **☐** |
| 1. the program and session objectives were attained | **☐** | **☐** | **☐** | **☐** |
| 1. the program objectives were attainable - reasonable and within the capacity of the participants to achieve given conditions | **☐** | **☐** | **☐** | **☐** |
| 1. the program objectives were time-bounded - achieved within the specific period of time | **☐** | **☐** | **☐** | **☐** |
| 1. there was a balance of cognitive, behavioral and effective objectives | **☐** | **☐** | **☐** | **☐** |
| 1. the objectives of each session were relevant and contributory to the attainment of the program terminal objective | **☐** | **☐** | **☐** | **☐** |
| 1. the training design had the necessary contents and elements that are vital to the attainment of program objectives | **☐** | **☐** | **☐** | **☐** |
| 1. the program objectives were delivered during the delivery of each session | **☐** | **☐** | **☐** | **☐** |

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| 1. the gradual attainment of program objectives were evident through participants' daily evaluation | **☐** | **☐** | **☐** | **☐** |
| 1. the assessment (pre-test & post test or any form of evaluation) were congruent to the program objectives | **☐** | **☐** | **☐** | **☐** |
| 1. the daily evaluation tools used had indicators describing the attainment of training objectives | **☐** | **☐** | **☐** | **☐** |
| 1. the daily evaluation tools used had indicators describing the attainment of training objectives | **☐** | **☐** | **☐** | **☐** |
| 1. **Delivery of Content** |  |  |  |  |
| 1. program content was appropriate to trainees’ roles and responsibilities | **☐** | **☐** | **☐** | **☐** |
| 1. content delivered was based on authoritative and reliable sources | **☐** | **☐** | **☐** | **☐** |
| 1. the session activities were effective in generating learning | **☐** | **☐** | **☐** | **☐** |
| 1. adult learning methodologies were used effectively | **☐** | **☐** | **☐** | **☐** |
| 1. management of learning was effectively structured | **☐** | **☐** | **☐** | **☐** |
| 1. contribution of all trainees were encouraged | **☐** | **☐** | **☐** | **☐** |
| 1. trainees demonstrated a clear understanding of the content delivered | **☐** | **☐** | **☐** | **☐** |

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| **D. Provision of Support Materials** |  |  |  |  |
| 1. the support materials provided were appropriate to trainees’ needs | **☐** | **☐** | **☐** | **☐** |
| 1. support materials were adequate and were given on time | **☐** | **☐** | **☐** | **☐** |
| 1. **Program Management Team** |  |  |  |  |
| 1. Program Management Team members were courteous | **☐** | **☐** | **☐** | **☐** |
| 1. Program Management Team was efficient | **☐** | **☐** | **☐** | **☐** |
| 1. Program Management Team was responsive to the needs of trainees | **☐** | **☐** | **☐** | **☐** |
| 1. **Venue and Accommodation** |  |  |  |  |
| 1. the venue was well lighted | **☐** | **☐** | **☐** | **☐** |
| 1. The venue was well-ventilated | **☐** | **☐** | **☐** | **☐** |
| 1. the venue was comfortable with sufficient space for program activities | **☐** | **☐** | **☐** | **☐** |
| 1. the venue had sanitary and hygienic conditions with adequate comfort rooms | **☐** | **☐** | **☐** | **☐** |
| 1. meals were nutritious and sufficient in quantity and quality. | **☐** | **☐** | **☐** | **☐** |
| 1. meals were generally well-prepared and tasty | **☐** | **☐** | **☐** | **☐** |
| 1. the accommodation was comfortable with sanitary and hygienic conditions | **☐** | **☐** | **☐** | **☐** |

*Please provide your honest response to each of the following questions:*

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| --- |
| **What do you consider your most significant learning from the program?** |
| **Briefly describe what you have learned and how it will help you with your work.** |
| **What changes would you suggest to improve similar programs in the future?** |
| **What further comments do you have?** |

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| Name and Signature of Evaluator: | |  | |
| Date Evaluated: | Click here to enter a date. | |  |