FEEDBACK FORM

Instruction: Please indicate (**v**) your level of agreement with the statements listed below:

SI no	Question	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
1	The objectives of the training					
	were clearly defined.					
2	Participation and interactions					
	were encouraged.					
3	The topics covered were					
	relevant to me					
4	The content was organized and					
	easy to follow					
5	This training experience will be					
	useful in my work					
6	The trainer was well prepared					
7	The training objectives were					
	met					
8	The time allotted for the					
	training was sufficient					
9	The meeting room and					
	facilities were adequate and					
	comfortable					

Answer the following question in **ONE** sentence:

- 10. What did you like most about the training?
- 11. What aspects of the training could be improved?
- 12. Which session/topic was the most interesting to you?
- 13. Which session/topic was the least interesting to you?
- 14. What additional topic/session would you recommend?
- 15. How do you hope to change your practice as a result of this training?
- 16. Please share other comments or expand on previous responses here:

Thank you for your feedback!