



Training Evaluation

Trainer: _____ Class Location: _____

1. This year will be my _____ year as a Volunteer Program assistant.

2. Was the training suited to your level of experience?
 Too Basic Just Right Too Complex

What information will be most useful? _____

What information will be least useful? _____

3. Were class objectives stated clearly at the beginning of the class?
 Yes No

Comments: _____

4. Did the class time allow for adequate coverage of each objective?
 Yes No

Comments: _____

5. Did the California volunteer manual contain accurate and comprehensive information for the stated objectives?
 Yes No

Comments: _____

6. Based upon the desired objectives, what is your overall rating of the state training?
 Excellent Good Fair Needs Improvement

Comments: _____

7. How would you rate the performance of the instructor?
 Excellent Good Fair Needs Improvement

Comments: _____

Include additional comments about the program presentation and/or the instructor below:

Email or fax your request to: Volunteercoordinator@ftb.ca.gov or 916.845.9004.

California Volunteers Make The Difference

Thank You!