Teachers' Workshop Evaluation Form

This form is to collect feedback on the work	shop you h	ave atte	ended. Kin	dly give hor	nest
feedback to help us improve. School code:					
Teacher code					
Date:					
lease indicate your impressions of the items liste Training components	ed below. Strongly	Λστρρ	Neutral	Disagree	Strongl
Training components	Agree	Agree	Neutrai	Disagree	Disagre
 The training gave me general understanding of the critical thinking about health. 	0	0	0	0	0
2. The training gave me a clear overview and flow of all lessons.	0	0	0	0	0
3. I can navigate through the resources, and I know where I can find all that I need on the website	0	0	0	0	0
 Now I understand all teaching strategies relevant for teaching critical thinking about health 	0	0	0	0	0
5. The training gave me teaching tips that I need to consider while teaching CHOICE lessons	0	0	0	0	0
6. I am confident that I understand and can teach all 10 lessons	0	0	0	0	0
Competences					
7. The training met my expectations.	0	0	0	0	0
8. I will be able to apply the knowledge learned.	0	0	0	•	0
The training objectives for each topic were identified and followed.	0	0	0	0	0

0

0 0 0

Training materials

to follow.

10. The content was organized and easy

0

	11. The materials d pertinent and usefu		0	•	0	0	0	0		
	Trainers									
	12. The trainer was knowledgeable.		0	•	0	0	0	0		
	13. The quality of instruction was good.		. 0)	0	0	•	0		
	14. The trainer met the training objectives.		0	•	0	0	0	0		
	15. Class participation and interaction were encouraged.		0	•	0	0	0	0		
	16. Adequate time was provided for questions and discussion.		0	•	0	0	0	0		
17. How do you rate the training overall?										
I	Excellent O	Good O	Average	е	Poor	•	ery poor ()		
18. What aspects of the training could be improved?										
19. What was most useful?										
20. \	What was least usefu	l?								
21. Other comments?										