**NEPHTC Evaluation Template**

1. **Change in Knowledge (Required for all HRSA-supported trainings except for webinars)**

Pretest/Posttest using training-specific quiz questions to assess change in knowledge as a result of training.

If you need help with pre post test creation, please do not hesitate to call NEPHTC Evaluator Hope Kenefick (613) 664-9920 or email hopewk@comcast.net. Hope is happy to look at your training and review training-specific questions.

If you need examples from other trainings, please feel free to contact Karla (toddks@bu.edu).

1. **Satisfaction with/Reaction to Training**

Please use the scale and make an X to show how much agree with the following statements about the session.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | 1Strongly disagree | 2 Disagree | 3 Neutral | 4 Agree | 5Strongly agree |
| 1. My understanding of the subject matter has improved as a result of having participated in this training.
 |  |  |  |  |  |
| 1. I have identified actions I will take to apply information I learned from this training in my work.
 |  |  |  |  |  |
| 1. The information was presented in ways I could clearly understand.
 |  |  |  |  |  |
| 1. I was satisfied with this training/course overall.
 |  |  |  |  |  |

1. **Application**

For multi-session programs or courses, ask only once.

Please make an X to show if you think each statement below is true or false.

|  |  |  |
| --- | --- | --- |
|  | True | False |
| I will apply this training to a state or national certification |  |  |

1. **Optional Questions**

Consider these types of questions to evaluate instructors and/or new sessions or courses.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | 1Strongly disagree | 2 Disagree | 3 Neutral | 4 Agree | 5Strongly agree |
| The content will be useful to me in my work. |  |  |  |  |  |
| The training was appropriate for my skill level. |  |  |  |  |  |
| The instructor was knowledgeable about the subject matter. |  |  |  |  |  |
| The instructor encouraged questions. |  |  |  |  |  |
| The amount of time allotted was sufficient. |  |  |  |  |  |

How could the session be improved?

What other training topics would you be interested in?