

Student Evaluation Form

Traffic Control Inside the Construction Site

INSTRUCTOR: _____ Class Date: _____

	RATING SCALE			
	Poor	Fair	Good	Excellent
The Training Program:				
• Purpose of class and work applications are clear				
• Participant material – useful and easy to follow				
• My skills will be improved by class experience				
• I have learned or reinforced information important to safety				
The Instructor:				
• Presentation—clear, interesting and understandable, uses good examples				
• Organization—comfortable flow of information and use of materials				
• Facilitation—promotes questions, interaction, enthusiasm, maintains eye contact				
• Exercises are helpful and reinforce learning				
Overall Rating of the Course and Instruction:				

HOW DID YOU HEAR ABOUT US?

<input type="checkbox"/> Website	<input type="checkbox"/> Facebook
<input type="checkbox"/> Company / Co-Worker	<input type="checkbox"/> ESC Newsletter

This material was produced under grant number SH-31248-SH7 from the Occupational Safety and Health Administration, U.S. Department of Labor. It does not necessarily reflect the views or policies of the U.S. Department of Labor, nor does mention of trade names, commercial products, or organizations imply endorsement by the U.S. Government.

COMMENTS:

Company Name: _____ Your Name _____
(optional)

Phone (Optional) : _____ Email (optional): _____