

I am a (Profession): Trainer.
 Name (Optional) : Rose Home.

How did you hear about this training? Yvette Allen.

Why did you choose to attend this training? Add to leadbox.

Would you recommend this training and why? Yes - Help people activate more resources in life.

Can we use your comments? Yes / No

Please indicate your impressions of the items listed below.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1. The training met my expectations.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. I will be able to apply the knowledge learned.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. The training objectives for each topic were identified and followed.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. The content was organized and easy to follow.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. The materials distributed were pertinent and useful.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. The trainer was knowledgeable.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. The quality of instruction was good.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Class participation and interaction were encouraged.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Adequate time was provided for questions and discussion.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10. How do you rate the training overall?
 Excellent Good Average Poor Very poor

11. What did you like about the training?
organized, well explained,

12. Do you have any suggestions or improvements for future trainings?
It was a great training.

13. Any other comments?
Professional, well explained and executed

I am a (Profession): Hypnotherapist
 Name (Optional) : Beryl Bechell

How did you hear about this training? Yvette

Why did you choose to attend this training? _____

Would you recommend this training and why? Yes Very Relaxed informative Sessions

Can we use your comments? Yes / No

Please indicate your impressions of the items listed below.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1. The training met my expectations.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. I will be able to apply the knowledge learned.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. The training objectives for each topic were identified and followed.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. The content was organized and easy to follow.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. The materials distributed were pertinent and useful.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. The trainer was knowledgeable.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. The quality of instruction was good.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Class participation and interaction were encouraged.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Adequate time was provided for questions and discussion.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10. How do you rate the training overall?
 Excellent Good Average Poor Very poor

11. What did you like about the training? Well presented and organised training with good back up folders & printed notes. Easy to understand

12. Do you have any suggestions or improvements for future trainings?
No

13. Any other comments?
Great 2 days.

Resource Therapy Training Workshop Date _____
Evaluation Form

I am a (Profession): Therapist

Name (Optional) : Rennae Macaskill

How did you hear about this training? website

Why did you choose to attend this training? Advance my knowledge

Would you recommend this training and why? Yes, well planned + skills to understand easy

Can we use your comments? Yes / No

Please indicate your impressions of the items listed below.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1. The training met my expectations.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. I will be able to apply the knowledge learned.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. The training objectives for each topic were identified and followed.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. The content was organized and easy to follow.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. The materials distributed were pertinent and useful.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. The trainer was knowledgeable.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. The quality of instruction was good.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Class participation and interaction were encouraged.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Adequate time was provided for questions and discussion.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10. How do you rate the training overall?
 Excellent Good Average Poor Very poor

11. What did you like about the training?
Informative, well organised, well explained professional setting with a relaxed feel.

12. Do you have any suggestions or improvements for future trainings?
more from on my cap

13. Any other comments?

I usually struggle expressing myself and participating in demonstrations however I found myself participating willingly.

THANK YOU FOR YOUR PARTICIPATION!

I am a (Profession): Pharmacist / Therapist

Name (Optional) : Diane Reese

How did you hear about this training? word of mouth

Why did you choose to attend this training? Needed to refresh

Would you recommend this training and why? Good quality, structured, handy

Can we use your comments? Yes / No

Please indicate your impressions of the items listed below.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1. The training met my expectations.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. I will be able to apply the knowledge learned.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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6. The trainer was knowledgeable.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. The quality of instruction was good.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Class participation and interaction were encouraged.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Adequate time was provided for questions and discussion.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. How do you rate the training overall?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Excellent	Good	Average	Poor	Very poor

11. What did you like about the training?
Patience! Good planning

12. Do you have any suggestions or improvements for future trainings?
A few typos but material very high quality.

13. Any other comments?
 (i) let me know when next full training 2017
 (ii) Need any help to NLP?

THANK YOU FOR YOUR PARTICIPATION!