

## **VISITOR TRAINING PROGRAM**

## **Course Evaluation Form**

Please complete this form and return to your Visitor Coordinator at the end of the session. Your feedback is valuable to us. We are committed to continual improvement and suggestions will be considered.

Criteria	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Training was relevant to my needs					
Materials provided were helpful					
Length of workshop was sufficient					
Content was well organized					
Reflection points and discussions were applicable					
Instructions were clear and understandable					
Training met my expectations					
The presenters and/or presentation was effective					
The presenters were knowledgeable					
Role play (if used was helpful)					

## Suggestions for future training:

Questions? Visit our website at www.ostomycanada.ca or call toll-free at 1-888-969-9698

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