Water Plant Operators Course
Instructor Feedback Form

Location: _________________________________ Date: ___________________
Instructor: _________________________________ Job Title: ________________

This information will be used to improve the quality of training and make sure that it is meeting the needs of Instructors and SITE FACILITATORS.

1. Please list any slides that your state added to the presentation.

2. Please list any slides that you chose not to include in the presentation.

3. Please list the slides that were difficult for you to interpret.

4. Was there anything that came up in the training that CDC should be made aware of. (For example, any questions that couldn’t be answered during discussion)

5. Instructions and explanations about the training were clear. If you disagree, please explain why. _____________________________________________
   a) Agree
   b) No opinion
   c) Disagree
   d) Not applicable
6. The instructional strategies helped me to teach the course material. If you disagree, please explain why.______________________________________________________________
   a) Agree  
   b) No opinion  
   c) Disagree  
   d) Not applicable

7. The training facility was comfortable and had proper equipment available. If you disagree, please explain why.______________________________________________________________
   a) Agree  
   b) No opinion  
   c) Disagree  
   d) Not applicable

8. Overall, quality of the training.
   a) Poor  
   b) Fair  
   c) Good  
   d) Excellent

9. How would you improve this course? (Check all that apply.) (If you selected any of the following choices, please explain why)
   ___ I would suggest providing more training for the instructors/trainers. (For example, train the trainer workshop or video.)
   _______________________________________________________________________
   _______________________________________________________________________
   ___ I would shorten the length of the course. (For example, shortening to one morning session)
   _______________________________________________________________________
   _______________________________________________________________________
   ___ I would allot more time for the course. (For example, a two day course vs. one day)
   _______________________________________________________________________
   _______________________________________________________________________
I would suggest reducing the content covered in this course. (Is there any content that you feel does not belong in this course? Is there any additional content that you feel would fit better?)

_____________________________________________________________________

_____________________________________________________________________

I would suggest reducing the number of slides. (If checked, which slides would you delete? Would you add any slides?)

_____________________________________________________________________

_____________________________________________________________________

I would reorganize the course instructions, material, and presentation outline by doing the following:

_____________________________________________________________________

_____________________________________________________________________

I would suggest clarifying the course objectives. (Were they too broad, not targeted or focused for our audience)

_____________________________________________________________________

_____________________________________________________________________

I would make course activities more stimulating to engage the participants by:

_____________________________________________________________________

_____________________________________________________________________

I would integrate more hands on activities in the training. (i.e. demonstrations, role play, etc)

_____________________________________________________________________

_____________________________________________________________________