



COURSE EVALUATION

SCAN ME

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OSHA Course Title	Date				
(1) Please complete the following statements about the Course .					
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
The course objectives were explained	0	0	0	0	0
The course met the defined objectives	0	0	0	0	0
The classroom was favorable to learning	0	0	0	0	0
Course materials were well organized and easy to understand	0	0	0	0	0
This educational experience will help me do my job better	0	0	0	0	0
I would recommend this course to others in my field	0	0	0	0	0
Prepared me to recognize hazards on the job	0	0	0	0	0
Increased my knowledge of how to control workplace hazards	0	0	0	0	0
(2) Please complete the following statements about <u>Instructor 1</u> .					
Name of Instructor 1:	Strongly Disagree	Disagree	Agree	Strongly Agree	NA
Demonstrated thorough knowledge of the subject	O	0	0	O	0
Provided useful, real-world examples	0	0	0	0	0
Involved participants in activities and discussions	0	0	0	0	0
Presented information in a clear, understandable manner	0	0	0	0	0
I would take another course with this instructor	0	0	0	0	0
(3) Please complete the following statements about <u>Instructor 2</u> .					
Name of Instructor 2:	Strongly Disagree	Disagree	Agree	Strongly Agree	NA
Demonstrated thorough knowledge of the subject	0	0	0	0	0
Provided useful, real-world examples	0	0	0	0	0
Involved participants in activities and discussions	0	0	0	0	0
Presented information in a clear, understandable manner	0	0	0	0	0
I would take another course with this instructor	0	0	0	0	0
(4) Please rate the Course Overall O Poor O Average O Good O Excellent O Poor O Average O Good O Excellent					
O 1001 O Average O 0000 O Excellent					
(6) The most important thing that I learned and will use from this course was					
(7) The course would be more helpful to me if it					
(8) Something that I will do differently because of this course is					

(9) Please write any additional comments about the course or instructor on the back of this form.