## **Training Feedback Form**

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| **To be filled by Trainee**  |
| Employee Name: Budhi Maya Subba | Date: 14-12-22 |
| Trainer Name & Designation : Jamba Choeda, Basis Admin |
| Course Title: SAP Basis |
| Location (Institute, Country): | **Thimphu TechPark Limited, Bhutan** |
| Training Date: | **25th July to 29th July 2022** |
| Training Type *(please tick)* | In-House | C:\Users\USER\Desktop\t.pngIn-Country  | Ex-Country  |
|  |
| **SN** | **Particulars** | **Strongly Agree** | **Agree** | **Neutral** | **Disagree** | **Strongly Disagree** |
| **Course Contents** |
| 1. | The objectives of training were clearly defined  | C:\Users\USER\Desktop\t.png |  |  |  |  |
| 2. | The content was organized and easy to follow |  | C:\Users\USER\Desktop\t.png |  |  |  |
| 3. | The materials distributed were pertinent and useful  |  | C:\Users\USER\Desktop\t.png |  |  |  |
| **Resource Persons** |
| 4. | The Resource Persons were knowledgeable about the training topic | C:\Users\USER\Desktop\t.png |  |  |  |  |
| 5. | The quality of instructions was good  |  | C:\Users\USER\Desktop\t.png |  |  |  |
| 6. | The Resource Persons met the training objectives |  | C:\Users\USER\Desktop\t.png |  |  |  |
| **Relevance & benefit** |
| 7. | Training was relevant to my needs  | C:\Users\USER\Desktop\t.png |  |  |  |  |
| 8. | Training met my expectations  |  | C:\Users\USER\Desktop\t.png |  |  |  |
| 9. | The training experience will be useful in my work |  | C:\Users\USER\Desktop\t.png |  |  |  |
| **SN** | **Particulars** | **Strongly Agree** | **Agree** | **Neutral** | **Disagree** | **Strongly Disagree** |
| **Facility & Environment** |
| 10. | The training rooms and facilities were adequate and comfortable  |  | C:\Users\USER\Desktop\t.png |  |  |  |
| **Training Duration** |
| 11. | The duration of training program was adequate | **Long** | **Enough** | **Short** |
|  | C:\Users\USER\Desktop\t.png |  |
| **If duration of training is not Enough, then please suggest (Use additional paper, if required):** |
| **Overall Training Rating** |
| **Overall how do you rate this training** | **Excellent** | **Good** | **Average** | **Poor** | **Very poor** |
|  | C:\Users\USER\Desktop\t.png |  |  |  |
| **Any other observations/recommendations (Use additional paper, if required):****No Comments.** |
| **The training was in conformity with the training need identified in my EAS?** | C:\Users\USER\Desktop\t.png**Yes** | **No** |
| **Total Training Investment** |
| Course/Registration fees: | Nu. 5000.00 |
| DSA, TA & Other Misc. Expenses: | Nu. 8000.00 |
| **Signature of Trainee** |  |
| **To be completed by HRA** |
| Training Records Noted by: |  |
| Date & Signature | DD/MM/YY |