

2012-2013 Agent Services Training Course Evaluation Sheet

Date Attended _____ Class Type Attended ADVANCED ONLINE TRAINING

Location: RUNKLE'S NOTARY & INSURANCE ONLINE TRAINING COURSE

Name of Attendee _____

Attendee Email Address _____

Attendee Telephone Number _____

In order to improve the quality of future training sessions, we would like to know your thoughts about today's program. Please complete the following questions and fax this sheet to Runkle's at 717-521-3004. Thank you.

Please rate the training course on the following criteria:

	Excellent	Very Good	Good	Poor	Very Poor
Quality of Presentation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Materials Provided	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What topics would you like to have discussed next season?

What can be done differently in the training courses to better meet your needs?

Comments/Suggestions regarding today's presentation.
