UMCHS
Umatilla-Morrow Head Start, Inc.

TRAINING EVALUATION

TOPIC_____

TRAINER_____ **DATE**_____

Please give this training a grade: **A   B   C   D   F**

What did you learn today that you anticipate using in your work?

_____

_____

Please list any areas of interest for consideration at a follow-up workshop.

_____

_____

General Comments:

Thank you for taking the time to help us improve our trainings!