

Empower Us Training Evaluation

Please fill in this evaluation form about the training. Circle the face that matches the way you feel.

What is your name?

What country are you from?

What organisation are you from?

How do you feel about the training?



Very bad



Bad



OK



Good



Great

Were you able to follow and understand the training?



No



Maybe



Yes

What do you feel about the length of the training?



Very badly



Badly



OK



Good



Great

What do you feel about the activities we used in the training?



Very bad



Bad



OK



Good



Great

Did you learn new things about self-advocacy and rights in this training?



No



Maybe



Yes

Do you feel confident about speaking to others about self-advocacy and inclusion?



No



Maybe



Yes

Please write here what you liked most about the training

Empty box for writing feedback.

Please write here what we can change for next time

Please write here any other ideas or comments you have about the training.

Thank you for filling in and returning this form.