

# Monitoring and Evaluation Support Project

## Training Course Evaluation Form

### I. Course Information:

Course Title: AMEP/PIRS IPs

Course Date: April, 4 2016

Location: MESP Office

### II. Course Evaluation:

The statements below concern specific aspects of this course. Please indicate to what extent you agree with each statement by circling the appropriate number using the following scale:

1 = Strongly Disagree ☹☹

4 = Agree 😊

2 = Disagree ☹

5 = Strongly Agree 😊😊

3 = Somewhat Agree 😊

	☹☹ Strongly Disagree	☹ Disagree	😊 Somewhat Agree	😊 Agree	😊😊 Strongly Agree
1. The course was relevant to what I do on the job.	1	2	3	4	5
2. The course was well organized.	1	2	3	4	5
3. I feel that the course has added to my knowledge of the subject.	1	2	3	4	5
4. I anticipate sharing my learning with my colleagues.	1	2	3	4	5
5. I plan to implement relevant sections in my job.	1	2	3	4	5

6. Overall rating of the course (Please circle one).

Poor

Fair

Good

Excellent

7. How do you expect to apply what you have learned in this course?

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8. What other M&E trainings and workshops would you be interested to join?

Please select up to three courses and record their codes in order of priority in the space below.

A- How to prepare for Data Quality Assessments (DQA).

B- How to develop performance indicators.

C- Development hypothesis and theory of change.

D- How to develop Results Framework (RF).

E- Basics of evaluation.

F- M&E fundamentals.

G- Best practices in performance reporting.

H- Setting baselines and targets.

I- Other. Please specify:

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I am interested in joining the following trainings:

First choice:

Second Choice:

Third Choice:

9. Do you foresee any barriers/challenges in implementing what you have learned today? What are they?

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10. What would you suggest to change about the course? Please share with us any information you believe would help us improve the course.

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### III. Optional information:

Please note that completing this section is optional.

1. Type of staff, please select:

☐

M&E

☐

Program Officer

☐

Senior Management

☐

Other

2. Name of Activity: 

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3. If you would like MESP team to contact you regarding a specific issue, please write your name and contact details below:

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