

Background Information

A. Training Name

Drop-down Menu

B. Trainer's Name

Drop-down Menu

C. How long have you worked in the field?

- a. 0-1 years
- b. 2-5 years
- c. 6-10 years
- d. 11-20 years
- e. 21+ years

D. Please check the boxes that best describe your current role.

- a. Center-Based Child Care Professional
- b. Family Child Care Professional
- c. Center-Based Director / Administrator
- d. Public Prekindergarten teacher or staff member
- e. Mentor
- f. Sponsor
- g. Instructor/trainer
- h. Afterschool Professional
- i. K-3 Professional
- j. CIS Professional and/or Home Visitor
- k. Other (please specify):

Open-Ended Text Box

E. Completion date of training

Entered by respondent

Trainer

Please tell us the extent to which you agree or disagree with the following statements:

[If < 3, "Please tell us why you disagree with the statement"]	Strongly Disagree	Disagree	Feel Neutral	Agree	Strongly Agree	N/A or Don't Know
1. The trainer was well organized.	☉	☉	☉	☉	☉	☉
2. The trainer clearly stated the learning objectives for the training.	☉	☉	☉	☉	☉	☉
3. The trainer had a strong grasp of the training material.	☉	☉	☉	☉	☉	☉
4. The trainer was respectful of the participants' levels of knowledge and experience.	☉	☉	☉	☉	☉	☉
5. The trainer related the training content to participants' work.	☉	☉	☉	☉	☉	☉
6. The trainer engaged participants in discussion or activity.	☉	☉	☉	☉	☉	☉
7. I would take a training with this trainer again.	☉	☉	☉	☉	☉	☉
8. Overall, I was satisfied with the trainer.	☉	☉	☉	☉	☉	☉

Training

Please tell us the extent to which you agree or disagree with the following statements:

[If < 3, "Please tell us why you disagree with the statement"]	Strongly Disagree	Disagree	Feel Neutral	Agree	Strongly Agree	N/A or Don't Know
1. The training achieved its learning objectives.	☉	☉	☉	☉	☉	☉
2. The training provided me with specific tools or strategies to use in my work.	☉	☉	☉	☉	☉	☉
3. I am likely to use at least one of the tools or strategies presented in this training.	☉	☉	☉	☉	☉	☉
4. I felt the training was worth my time and effort.	☉	☉	☉	☉	☉	☉
5. I would recommend this training to a colleague.	☉	☉	☉	☉	☉	☉
6. Overall, I was satisfied with the training.	☉	☉	☉	☉	☉	☉
7. I would like more trainings in this subject area.	☉	☉	☉	☉	☉	☉

8. Please rate your knowledge of the training topic BEFORE and AFTER the training (1-7 1 = No knowledge, 7 = Advanced knowledge)

	No Knowledge <-> Advanced Knowledge						
	1	2	3	4	5	6	7
a. Before	☉	☉	☉	☉	☉	☉	☉
b. After	☉	☉	☉	☉	☉	☉	☉

9. If you had had the choice to take this training online in real time or in-person, which would you prefer?

- a. Online ☉
- b. In-Person ☉
- c. No Preference ☉

10. How could this training be improved?

Open-Ended Response

11. Additional Comments:

Open-Ended Response

12. Comments or suggestions about this questionnaire:

Open-Ended Response (for pilot phase)