

# COMMERCIAL CLEANING SOLUTIONS LTD.

14 Octavian Way, Team Valley Trading Estate, Gateshead, Tyne & Wear, NE110HZ

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## DAILY EVALUATION FORM

Name of Attendee

Name of training: .....

*Scott Brady*

Date: .....

*25/7/17*

1. What did you enjoy most about today?

*i enjoyed all the information i was given about duct cleaning*

2. What did you learn during today's sessions that you anticipate using in your work?

*all the parts of this course.*

3. Was there anything you did not understand during today's sessions? Please provide specific examples.

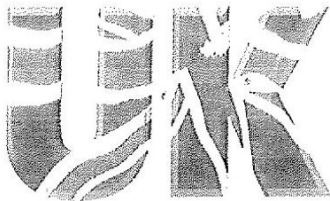
*no.*

4. What is the most valuable thing you have learnt today (knowledge or skill)?

*about what could happen if ducts are not clean.*

5. What other specific comments do you have?

*Thank you very much!*



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6. How happy were you with the theory side of the Training course?

Not Happy 1 2 3 4 5 6 7 8 9 Very Happy 10

7. How happy were you with the Practical side of the training course?

Not Happy 1 2 3 4 5 6 7 8 9 Very Happy 10

8. How happy were you with the course overall?

Not Happy 1 2 3 4 5 6 7 8 9 Very Happy 10

9. Was your Trainer helpful?

Very helpful.

10. Did your Trainer answer any questions you had clearly?

yes