



## Section 1 Trainee Declaration

\* Note: This document must be submitted with the final payment request to confirm completion of training.

This declaration is made by:

<b>Participant Name (please print):</b>	<b>Company Name:</b>
<b>Email:</b>	<b>Telephone Number:</b>

<b>Name of Course/Training:</b>	<b>Number of training hours completed:</b>	<b>Training Dates (Day/Month/Year):</b>	
		<b>Start</b>	<b>End</b>

<b>Statement of Declaration:</b>
I have completed the training as per details indicated above; on the date indicated above. <b>Signature:</b> _____  <b>Date:</b> _____ (Day/Month/Year)

**The training participant is required to complete Sections 1, 2, 3.**



**Section 3**
**About the Training**

Please tell us about your experience as a participant in this training by marking an “X” under your level of agreement with the following statements:

1. The training content was what I expected.				
strongly disagree	somewhat disagree	neither agree or disagree	somewhat agree	strongly agree

2. The training has, or will enhance my workplace skills.				
strongly disagree	somewhat disagree	neither agree or disagree	somewhat agree	strongly agree

3. The trainer was knowledgeable about the training content.				
strongly disagree	somewhat disagree	neither agree or disagree	somewhat agree	strongly agree

Please answer the following questions.

4. Did you earn a credential as a result of this training?	Yes	No
Technical / Formal Training Credential		
Certificate of Completion		

5. What was your favourite part of the training?

6. If you have suggestions to improve the training, describe them here.

7. Any additional comments?