

A Matter of Balance Coach Training Class Evaluation

Date:

Thank you for participating in *A Matter of Balance* coach training. Please take a few minutes to complete this evaluation form. We appreciate your feedback.

Please circle answers that apply.

1. The leaders were well prepared.

Strongly Agree Agree Disagree Strongly Disagree

2. The class was well organized.

Strongly Agree Agree Disagree Strongly Disagree

3. The coach manual and handouts were useful.

Strongly Agree Agree Disagree Strongly Disagree

4. The classroom was suitable for the training

Strongly Agree Agree Disagree Strongly Disagree

5. After completing the training sessions, how confident are you that you can...

Facilitate a Matter of Balance class?

1. Totally confident 2. Very confident 3. Confident 4. Slightly confident 5. Not confident at all

Answer questions that might be asked by program participants?

1. Totally confident 2. Very confident 3. Confident 4. Slightly confident 5. Not confident at all

Lead the Matter of Balance exercises during the sessions?

1. Totally confident 2. Very confident 3. Confident 4. Slightly confident 5. Not confident at all

Assist participants using the Home Safety Checklist?

1. Totally confident 2. Very confident 3. Confident 4. Slightly confident 5. Not confident at all

6. Comments and Suggestions:

Thank You!