

Onboarding Training Feedback Sheet

Please complete this feedback sheet to help us improve our onboarding training process. Since this form is designed for printing, please fill in the text fields below.

General Information

Employee Name:

Job Title / Role:

Department:

Training Date:

Trainer/Facilitator Name:

Training Content Evaluation

Please rate the following aspects by typing a score from 1 to 5 (1 = Strongly Disagree, 5 = Strongly Agree):

1. The training objectives were clearly defined:
2. The content was relevant to my job role:
3. The pace of the training was appropriate:
4. The trainer was knowledgeable and helpful:
5. The training materials and resources provided were useful:

Open-Ended Feedback

What part of the onboarding training did you find most helpful?

What areas of the onboarding training could be improved?

Are there any additional topics or resources you wish had been covered?

Any other comments or suggestions?