

# Peer-to-Peer Training Review Form

This form is designed for peers to review and provide constructive feedback on training sessions. Please complete the fields below to help improve future training quality.

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## 1. General Information

Trainer Name:	<input type="text"/>
Reviewer Name:	<input type="text"/>
Training Topic/Subject:	<input type="text"/>
Date of Training:	<input type="text" value="DD/MM/YYYY"/>

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## 2. Training Evaluation

Please evaluate the following areas using a scale of 1 to 5 (1 = Needs Improvement, 5 = Excellent), or provide qualitative feedback.

Evaluation Criteria	Score (1-5)	Comments / Observations
<b>Clarity of Explanation:</b> Did the trainer explain concepts clearly?	<input type="text"/>	<input type="text"/>
<b>Subject Knowledge:</b> Did the trainer demonstrate deep knowledge of the topic?	<input type="text"/>	<input type="text"/>
<b>Engagement &amp; Interactivity:</b> Were participants kept engaged and involved?	<input type="text"/>	<input type="text"/>
<b>Pacing &amp; Time Management:</b> Was the pace of training appropriate?	<input type="text"/>	<input type="text"/>
<b>Use of Materials/Tools:</b> Were the slides, documents, or tools effective?	<input type="text"/>	<input type="text"/>

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## 3. Overall Feedback & Recommendations

Provide detailed notes for the trainer's professional development.

**Key Strengths (What went well?):**

**Areas for Improvement (What could be done differently?):**

**Recommended Action Items:**

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## 4. Sign-off

Trainer Signature:	<input type="text"/>	Date:	<input type="text"/>
Reviewer Signature:	<input type="text"/>	Date:	<input type="text"/>