



LEAD Training Course Evaluation

Date:	Location:
Course Name:	Instructor(s):

Course Content: Please circle the appropriate number 1 to 5; 1 being the lowest, 5 being the highest.

The course content was related to the course objectives.	1	2	3	4	5
The course content contained current information.	1	2	3	4	5
The course content was applicable to your job.	1	2	3	4	5
The course content was organized in a logical manner.	1	2	3	4	5
Course photographs, slides and/or computer presentations were appropriate.	1	2	3	4	5
Other training aids were appropriate.	1	2	3	4	5

Identify specific, strong areas of the course content:

Would you recommend this instruction be continued in its present state? YES NO

If not, why?

Identify any areas of the course content that need improvement:



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Instructor(s) Performance: Please circle the appropriate number 1 to 5; 1 being poor, 5 being excellent.

Knowledge of topic:	1	2	3	4	5
Prepared for class:	1	2	3	4	5
Able to maintain interest:	1	2	3	4	5
Use of teaching methods:	1	2	3	4	5
Use of questions and discussions:	1	2	3	4	5

Identify specific, strong areas of the instructor(s) performance:

Identify any areas of the instructor(s) performance which needed improvement:

Was the atmosphere conducive to training? YES NO

Did the instructor(s) present a professional image? YES NO

Other comments:

THANK YOU FOR YOUR INPUT!