C-VITA Student's Training Feedback

We would like feedback on how satisfied you were with the training you had today. Please complete this form and hand in to the instructor before leaving or give to your site manager. By providing this feedback, you will be helping us improve our next course material. Thank you for your time! **Territory** Area Date/s of Training Number of trainees Are you from an organization or coalition? No If YES, please specify. Yes Very Dissatisfied Very Satisfied Please rate your satisfaction with the training you received today by checking the appropriate number. 3 4 NA Convenience of hours 2. Convenience of location 3. Amount of time to complete course(s) 4. Opportunity to ask questions to help you learn 5. Ability of the instructor(s) to respond to questions 6. Presentation skills of instructor(s) 7. Opportunity to practice what you have been taught through exercises 8. Overall satisfaction with instruction (considering all items) Poor Excellent Please rate the content quality on a scale of 1 to 5, where 1 equals "Poor" and 5 equals "Excellent". 1 2 3 4 5 NA 9. Text Exercises 11. Graphics/Forms 12. Test 13. Overall quality of the course book and test Please rate your comfort level or readiness to prepare tax Very Uncomfortable Very Comfortable returns as a volunteer. Use the scale of 1 to 5, where 1 equals "Very Uncomfortable" and 5 equals "Very Comfortable". 1 2 3 4 5 NA 14. Readiness to prepare returns for course(s) taken

15. What suggestions or comments do you have about how we could improve the course or printed materials?

If more space is needed, please use the back of this form.

Thank you for your time and feedback.