



# Training USA



## American Heart Association ECC Program Course Evaluation

Please take a moment to complete this evaluation of this course in which you just participated.  
We want to provide excellent courses and we value your opinion.

Instructor:

Date:

Which course did you complete?

BLS  ACLS  PALS

Name of Course:

Training Site:

What is your profession and why are you taking this course?

Overall impression of course:

Excellent  Good  Fair  Poor

Comments:

Course objectives were met by instructor:

Excellent  Good  Fair  Poor

Comments:

Was there adequate equipment and was it clean and in working order?

Yes  No

Comments:

Were the physical facilities adequate for this course?

Yes  No

Comments:

Did the instructors present the material with knowledge and clarity?

Yes  No

Comments:

Did instructors provide adequate and helpful feedback?

Yes  No

Additional Comments: