



Driver Training

Client Course Evaluation Report (Spain)

As a service provider of security driver training courses; our aim is to constantly evaluate our training courses to ensure our methods of instruction, course content and material is not only up to date but clients are satisfied with their services they received. This client evaluation report provides direct feedback which will enable Testudo Security Consultants Limited to modify or make any necessary changes to achieve our aim. Please take a moment to complete the questions below and enter your remark or tick the appropriate box which refers to your opinion.

Course Dates From – To	No. of Participants	No. of Instructors	No. of Vehicles
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Please use the following score chart only to answer the questions:
1: UNSATISFACTORY 2: SATISFACTORY 3: GOOD 4: EXCELLENT
 Give your opinion as an "OVERALL" rating.

1	How did you find the course?	<input type="checkbox"/>
2	How do you rate the hotels and food used for the course?	<input type="checkbox"/>
3	How do you rate the training facility?	<input type="checkbox"/>
4	How do you rate the quality of the training vehicles?	<input type="checkbox"/>
5	How do you rate the classroom presentation?	<input type="checkbox"/>
6	How do you rate the instructors on their teaching ability?	<input type="checkbox"/>
7	How do you rate the instructors on their knowledge of the subject?	<input type="checkbox"/>
8	How was the ratio of participants to vehicles?	<input type="checkbox"/>
9	How was the ratio of instructors to participants?	<input type="checkbox"/>
10	How long was the waiting time between your turn to drive?	<input type="checkbox"/>

Please tick either the NO or YES box to answer the questions:		NO	YES
11	Is your main role as an assigned or HOM driver?	<input type="checkbox"/>	<input type="checkbox"/>
12	Have you previously attended a course like this before?	<input type="checkbox"/>	<input type="checkbox"/>
13	Were all the participants of an equal standard?	<input type="checkbox"/>	<input type="checkbox"/>
14	Were some drivers more experienced than you on the course?	<input type="checkbox"/>	<input type="checkbox"/>
15	Do you think your overall driving skills/knowledge has improved?	<input type="checkbox"/>	<input type="checkbox"/>
16	Did you find the confirmation test challenging or difficult?	<input type="checkbox"/>	<input type="checkbox"/>
17	Did you pass the confirmation test in the allocated time given?	<input type="checkbox"/>	<input type="checkbox"/>
18	Do you think you could have passed this test without this training?	<input type="checkbox"/>	<input type="checkbox"/>
19	Do you believe you were unfairly treated on the course?	<input type="checkbox"/>	<input type="checkbox"/>
20	Would you recommend this course to others?	<input type="checkbox"/>	<input type="checkbox"/>

PLEASE ENTER BELOW ANYTHING YOU WISH TO ADD