



STATE OF DELAWARE  
**CHILD PROTECTION ACCOUNTABILITY COMMISSION**

**“How to Identify and Report Child Abuse and Neglect in Delaware”**

Trainer: \_\_\_\_\_

Date: \_\_\_\_\_

Position: \_\_\_\_\_

Agency Trained and Location of Training: \_\_\_\_\_

Please complete this evaluation so we can utilize it to improve future trainings. Thank you.

**Please rate the relative value with an “X” for each item.**

		Excellent	Very Good	Good	Fair	Poor
	<b>Course Ratings</b>	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>
<b>1</b>	The learning objectives were made clear.					
<b>2</b>	The content was comprehensive.					
<b>3</b>	The content followed a logical sequence.					
<b>4</b>	The PowerPoint was effective in conveying information.					
<b>5</b>	The trainer was knowledgeable and communicated effectively.					
<b>6</b>	As a result of this training, I have an improved understanding of the child abuse and neglect indicators.					
<b>7</b>	As a result of this training, I know how and where to report child abuse and neglect.					
<b>8</b>	As a result of this training, I have a better understanding of my duty to report child abuse and neglect.					

**Comments or Recommendations? Feel free to use the back of the page.**