

CONSOLIDATED FEEDBACK REPORT TO BE SUBMITTED BY COURSE PROVIDER IN THE FORMAT AS SET OUT BELOW

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Course Date:

Course Provider name:

No. of Pax attended:												
No. of Forms:												
(Note: Course providers conducting Professional Competencies are required to ensure that at least 60% of participants for each course complete the post course evaluation form)												
COURSE	RATING	%										
	5		4		3		2		1		Total	
Course content was useful												
and relevant to my needs												
Course materials were up-to-												
date, well organised and												
presented in sufficient depth												
Course coverage was												
comprehensive												
Case studies presented were												
useful												
Course objectives were												
consistent with course as												
advertised												
Overall, I would rate the												
course												
	Yes	No	No Ans	Total								
Would you recommend this												
course to others to attend?												

TRAINER's Name:	RATING	%										
	5		4		3		2		1		Total	
Trainer demonstrated a comprehensive knowledge of the subject												
Trainer spoke clearly and distinctly. He/She is able to hold my interest												
Trainer's course delivery in terms of explaining the concepts and giving real life examples.												
Trainer encouraged questions and interact with the course participants to facilitate learning												
Trainer able to handle the Q&A session well.												
Trainer's sharing of his/her real estate practitioner's experience is useful to my learning												
Overall, I would rate the trainer												
(Note: To add in additional tables if there are more trainers involved in the CPD course)												
Other topics and/or speakers you would like to have: Course Participants' Comments (positive or negative):												
Actions to be taken by provider to improve CPD course (if any):												

Submitted by: (KEO/ Chief Executive in charge of the training provider) or a staff authorised by them

To provide name, designation and signature