APPENDIX N

RESPONSE FORM III: TRAINING EVALUATION

The following questions relate to the in-service training programme in which you participated. This information will be used to help the planning of further programmes.

SECTION A

1 What is your date of birth?

Day	Month	Year

SECTION B

2 Did the training help you to improve your knowledge regarding children with severe disabilities?

It didn't help	It helped a little	It helped quite a lot	It helped very much

3 Please answer the following questions related to the training method and training materials.

Yes	No	Uncertain		11
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				23
	Yes	Yes No	Yes No Uncertain	Yes No Uncertain

For official use Respondent no

Batch no

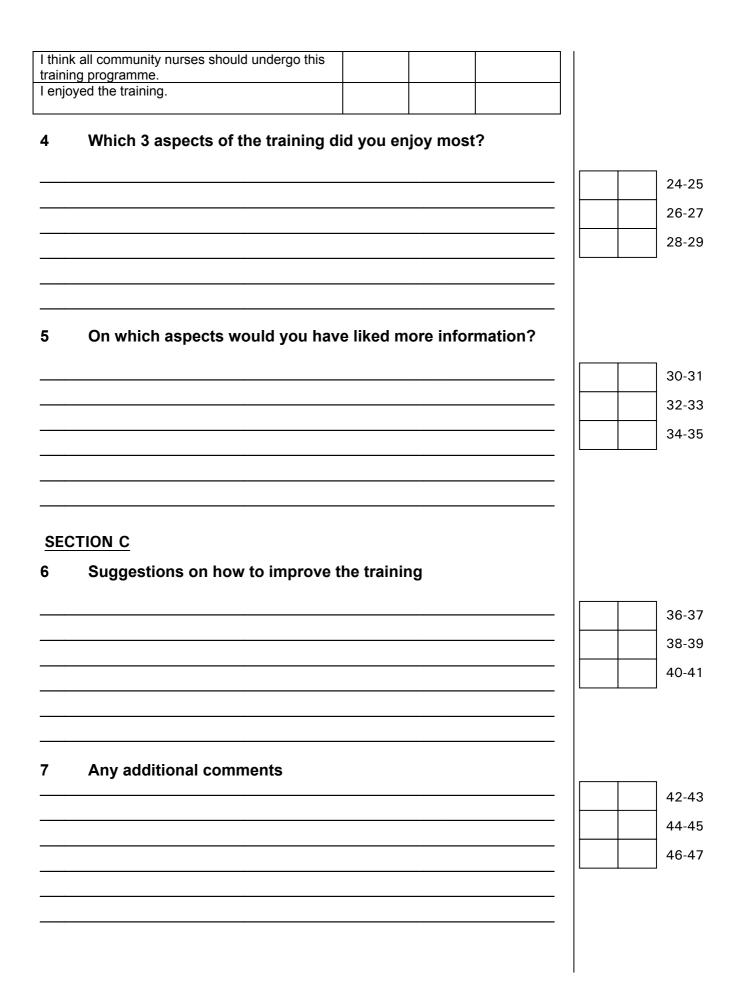
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SECTION D

8 Overall rating of the training 48 Very poor Poor Good Very good Excellent