

# AHA Healthcare Provider Course Evaluation Summary Report

Date of Course: \_\_\_\_\_

Location of Course: \_\_\_\_\_ Total # of evals: \_\_\_\_\_

Name of Instructor(s): \_\_\_\_\_

1. It was easy to enroll in the course.
2. I received the Healthcare Provider Student Workbook in time for me to read the pre-class assignments.
3. The course facilities were adequate.
4. There was enough equipment available for everyone to practice skills with little "standing around" time.
5. The equipment was clean and in good working order.

Strongly Disagree #1 Eval #	Disagree #2 Eval #	Neutral # 3 Eval #	Agree #4 Eval #	Strongly Agree #5 Eval #

**Instruction**

1. My instructor communicated clearly.
2. The instructor answered my questions.

Strongly Disagree #1 Eval #	Disagree #2 Eval #	Neutral # 3 Eval #	Agree #4 Eval #	Strongly Agree #5 Eval #

**Satisfaction:** Why did you take this course? \_\_\_\_\_  
\_\_\_\_\_

1. I would recommend this course to others.
2. I can apply the skills I have learned.

Strongly Disagree #1 Eval #	Disagree #2 Eval #	Neutral # 3 Eval #	Agree #4 Eval #	Strongly Agree #5 Eval #

Any comments you would like to make on the delivery, facilities, instructor and overall satisfaction with the course?

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*Please submit this summary of the evaluations with your course roster to CPR Consultants.*