



ITU Centres of Excellence Network for CIS

**Institute of Electronics and Telecommunication under Kyrgyz State Technical University
named after I. Razzakov**

**ITU Workshop on Technical Organization of Broadband Access
Bishkek, Kyrgyz Republic, 29 September – 2 October 2015**

WORKSHOP FEEDBACK FORM

We would like to ensure that the learning you undertake is of high quality and of relevance to you. In order for us to continuously monitor and improve our learning programmes, we kindly ask you to fill out this questionnaire as candidly and comprehensively as possible.

THANK YOU FOR YOUR FEEDBACK

Please indicate:

1. Your job title

2. Your job level

Staff Manager Executive Other (Specify)

3. Your Organization

Regulator Operator Government

Regional Organization Academia

Other (Specify) _____

Please indicate your level of agreement to the statements using the below scale.

Strongly Disagree=1 Disagree=2 Neutral =3 Agree=4 Strongly Agree=5

A. Relevance of workshop

I am satisfied with the:	1	2	3	4	5
1. Relevance of course content to my work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Topics being in line with my expectations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Course relevance to current trends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

B. Training Delivery

I am satisfied with the:	1	2	3	4	5
4. Number of days allocated to the course	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Delivery method used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Workshop materials and workshop aids	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Facilitator's knowledge of the subject matter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Facilitators preparedness and presentation skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Logical sequence on the topics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Illustrations, examples and practice sessions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Time allocated for learners to discuss and ask questions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Knowledge gained during workshop	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C. Workshop Logistics

I am satisfied with the:	1	2	3	4	5
13. Information provided to help with logistics for attending the workshop	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Registration Process	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Payment process (where applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. User friendliness of the ITU Website	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Support during workshop	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

D. Workshop Venue (face to face trainings only)

I am satisfied with the:	1	2	3	4	5
18. Information provided to help with logistics for travel and accommodation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Workshop venue	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Learning rooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Meals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

E. Overall

I am satisfied with:	1	2	3	4	5
1. The overall delivery and content of the	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. How this workshop met my expectations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What did you like best about the workshop?

What did you like least about the workshop?

Please state things you would want to see improved in future workshops

Please mention other areas of trainings that you would like to have

THANK YOU