

About this Training Of Trainers" Session

| l liked | | Poor | to | | Excellent | |
|---------|---|-------------|-------------|-------------|-------------|--|
| | Overall Session Printed materials Video | 1 1 1 | 2 2 2 | 3 3 3 | 4 4 4 | |

| Please rate facilitator (s) on: | Poor to Excellent | | | | | |
|---------------------------------|-------------------|---|---|---|--|--|
| Knowledge of topic | 1 | 2 | 3 | 4 | | |
| Responsiveness to group | 1 | 2 | 3 | 4 | | |
| Teaching methods | 1 | 2 | 3 | 4 | | |
| Organization | 1 | 2 | 3 | 4 | | |

As a result of this program, I have...

 ...a plan for how to present a 60-90 minute suicide prevention "awareness session" to my co-workers or community.

Low 1 2 3 4 High

...an understanding of how to teach the three steps to intervene in suicidal behavior. (Show you care, ask about suicide, get help.)

Low 1 2 3 4 High

...increased comfort with the material..

Low 1 2 3 4 High

I am still confused about... or would like more

information on: (Include your name & phone# or e-mail if you would Like a response).



| Changes? Modifications? Improvements? Comments? | |
|--|----------------------|
| Did this program meet your needs/ expectations? | List additional |
| ☐Yes ☐No ☐Not Sure ☐More than I expected | comments on the back |