

# PART® Train the Trainer (TTT) Evaluation

Please check the PART® Level: [ ] Level Three® [ ] Level Four® [ ] Level Five®

Check one: [ ] Initial TTT training [ ] Trainer Re-certification

PART® certified

instructor name(s): \_\_\_\_\_

Date: \_\_\_\_\_

Participant name:

(optional) \_\_\_\_\_

Please use the reverse side of this evaluation if you require additional space for your comments.

Rate yourself for each of the questions below:	Prior to the session (1 low; 5 high)	After the session (1 low; 5 high)
<b>Purpose</b>		
I understand Purpose.	1 2 3 4 5	1 2 3 4 5
I know how to apply the principles of Purpose.	1 2 3 4 5	1 2 3 4 5
<b>Professionalism</b>		
I understand Professionalism.	1 2 3 4 5	1 2 3 4 5
I know how to apply the principles of Professionalism.	1 2 3 4 5	1 2 3 4 5
<b>Preparation</b>		
I understand Preparation.	1 2 3 4 5	1 2 3 4 5
I know how to apply the principles of Preparation.	1 2 3 4 5	1 2 3 4 5
<b>Identification</b>		
I understand Identification.	1 2 3 4 5	1 2 3 4 5
I know how to apply the principles of Identification.	1 2 3 4 5	1 2 3 4 5
<b>Response</b>		
I understand Response.	1 2 3 4 5	1 2 3 4 5
I know how to apply the principles of Response.	1 2 3 4 5	1 2 3 4 5
<b>Level Three®: Evasion and Breakaway</b>		
I understand the principles of Evasion and Breakaway.	1 2 3 4 5	1 2 3 4 5
I can teach Evasion and Breakaway techniques.	1 2 3 4 5	1 2 3 4 5
<b>Level Four®: Evasion, Breakaway, and Escorts</b>		
I understand the principles of Manual Restraints.	1 2 3 4 5	1 2 3 4 5
I can teach escort techniques.	1 2 3 4 5	1 2 3 4 5
<b>Level Five®: Evasion, Breakaway, Escorts, and Manual Restraint</b>		
I can teach Manual Restraints.	1 2 3 4 5	1 2 3 4 5

Rate the PART® instructor for each of the questions below:	1 low; 5 high
Appeared well prepared to deliver the course.	1 2 3 4 5
Demonstrated a thorough knowledge of the subject matter.	1 2 3 4 5
Responded effectively to questions and challenges.	1 2 3 4 5
Held my attention throughout the course.	1 2 3 4 5
Was/were responsive to participant ideas and concerns.	1 2 3 4 5
Presented course material at a comfortable pace.	1 2 3 4 5

What other comments do you have about the PART® instructor?

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Rate the training environment:	1 low; 5 high
Room was favourable to learning.	1 2 3 4 5

What other comments do you have about the room?

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Describe one new skill that you will begin to use as soon as you return to your job.

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What did you find most important or most helpful during this session?

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If you could change one thing about this session, what would it be?

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In your workplace, what specific occupational health and safety concerns are you aware of?

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Your comments count – they will be reviewed by the PART® certified instructor and may be provided to SASWH.

You are welcome to contact SASWH at any time with concerns by emailing [info@saswh.ca](mailto:info@saswh.ca).

*Thank you* for completing this evaluation form.