

Level Two Program Evaluation Form

(Optional)

Level Two Module: _____

Program Dates: _____ Location: _____

Program Lead Trainer: _____

In order to serve you and to continue to maintain the integrity of the teachings, KRI-Aquarian Teacher would appreciate hearing about your experience of your Level Two Teacher Training module and its team.

1) How was the course managed and organized? Excellent ___ Average ___ Poor ___

Comments:

2) Would you recommend this course to someone else? Yes ___ No ___ If not why?

3) Did the course meet or exceed your expectations? Please explain:

4) How was the Home Study section of the course? Suggestions/Comments:

5) Do you have any other comments or suggestions?

6) Would you be interested in taking another Level Two module? Yes ___ No ___

