

GEMCOM ON-SITE COURSE EVALUATION FORM

As part of a continuous quality control and improvement system, we would appreciate your feedback on the training course you have just attended. Your comments are important to us!

COURSE INFORMATION

Course Name: _____

Instructor's Name: _____

Dates: _____

PERSONAL AND COMPANY INFORMATION

Name: _____

Address: _____

Job Title: _____

Company: _____

Phone: _____

Mine Site: _____

Email: _____

Please initial your approval for Gemcom to use or publish any comments you make on this evaluation form.

Please rate the instructor based on the following:

(Please use a rating of 1 to 5, where 1 = Poor and 5 = Excellent)

	POOR				EXCELLENT
	1	2	3	4	5
Very knowledgeable and competent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Course content in a clear and concise manner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Courteous and professional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to maintain my interest	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsive to participants' needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Enthusiastic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Do you have any other comments about the instructor? _____

Please rate the training course based on the following:

(Please use a rating of 1 to 5, where 1 = Poor and 5 = Excellent)

	POOR				EXCELLENT
	1	2	3	4	5
Course availability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Course content	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Time allocated for the course content	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Time allocated to complete labs/exercises	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Value of documentation and/or training materials used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability of the course to meet my objectives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Learned techniques that can be applied to my daily work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[see over for more questions]

GEMCOM ON-SITE COURSE EVALUATION FORM (continued)

Overall satisfaction:

(Please use a rating of 1 to 5, where 1 = Not at all satisfied and 5 = Very satisfied)

	NOT AT ALL SATISFIED			VERY SATISFIED	
	1	2	3	4	5
How satisfied are you with the training course provided by Gemcom?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What aspects did you like best about the training course? _____

What aspects did you like least about the training course? _____

What topics or features were the most difficult to learn or understand? _____

Would you recommend this Gemcom training course to a friend or colleague? Why or why not? _____

Would you recommend Gemcom software to a friend or colleague? Why or why not? _____

Are you aware of the following additional services provided by Gemcom?

	Yes	No	Please send more information
Project Assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
System Configuration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dedicated Support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please indicate additional training courses or products that may be of interest to you in the future:

- | | | |
|--|---|------------------------------------|
| <input type="checkbox"/> Introductory/Foundation training | <input type="checkbox"/> Geological Solids Modelling | <input type="checkbox"/> Surpac |
| <input type="checkbox"/> Full Featured Plotting Options | <input type="checkbox"/> Reserves Block Modelling | <input type="checkbox"/> GEMS |
| <input type="checkbox"/> Underground Mine Engineering workshop | <input type="checkbox"/> Open Pit Mine Engineering workshop | <input type="checkbox"/> Minex |
| <input type="checkbox"/> Surveying workshop | <input type="checkbox"/> Geological Database Management | <input type="checkbox"/> MineSched |
| <input type="checkbox"/> Task Automation with TCL Macros | <input type="checkbox"/> Gridded Seam Modelling, Beginner or Advanced | <input type="checkbox"/> Whittle |
| <input type="checkbox"/> Short-Term Mine Planning | <input type="checkbox"/> Mine Design in Stratified Deposits, Beginner or Advanced | <input type="checkbox"/> InSite |
| <input type="checkbox"/> Long-Term Mine Planning | <input type="checkbox"/> Pit Optimisation | <input type="checkbox"/> PCBC |

Please indicate any other topics you might be interested in learning about: _____