

Staff Training for Participant Education:
Lose the Fat, Keep the Vitamins, Drink Low Fat Milk
Staff Feedback

Agency name: _____
Agency #: _____
Training date: _____

Please check the response that most closely describes how you feel:

	<i>After this training:</i> How confident are you that you have the skills to educate participants using the following 3 methods?					
	Very confident	Confident	Not very confident	Not confident at all	Not sure	Didn't do
1) Group Lesson Plan						
2) One-on-One Worksheet						
3) Circle Charts						

What would make this training better?

Please give this form back your trainer (do not send form back to State WIC).

THANK YOU FOR YOUR FEEDBACK!!