

	Exam Serial Number:	
Construction Training Qualification Program	Exam Date:	
Name (First & Last Name): _		

**Trainee ID:** 

## **Marking Instructions**

- Use a No. 2 pencil only.
- Do not use ink, ballpoint, or felt tip pens.
- Make solid marks that fill the oval completely.
- Erase cleanly any marks you wish to change.
- Make no stray marks on this form.
- Do not fold, tear, or mutilate this form.

INCORRECT MARKS

 $\emptyset \otimes \Theta \odot$ 

CORRECT MARK

Yes

course)?

No

Is this a Challenge Exam (exam

taken without participating in a

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Plea	se mark your exam answers on th	ne follov	ving rows		
1	A B C D E	21	ABCDE	41	(A) (B) (C) (D) (E)
2	A B C D E	22	A B C D E	42	(A) (B) (C) (D) (E)
3	A B C D E	23	A B C D E	43	(A) (B) (C) (D) (E)
4	A B C D E	24	A B C D E	44	(A) (B) (C) (D) (E)
5	A B C D E	25	A B C D E	45	(A) (B) (C) (D) (E)
6	A B C D E	26	A B C D E	46	(A) (B) (C) (D) (E)
7	A B C D E	27	A B C D E	47	(A) (B) (C) (D) (E)
8	A B C D E	28	(A) (B) (C) (D) (E)	48	(A) (B) (C) (D) (E)
9	A B C D E	29	A B C D E	49	(A) (B) (C) (D) (E)
10	A B C D E	30	A B C D E	50	(A) (B) (C) (D) (E)
11	A B C D E	31	A B C D E	51	(A) (B) (C) (D) (E)
12	A B C D E	32	A B C D E	52	(A) (B) (C) (D) (E)
13	A B C D E	33	A B C D E	53	(A) (B) (C) (D) (E)
14	A B C D E	34	A B C D E	54	(A) (B) (C) (D) (E)
15	A B C D E	35	A B C D E	55	(A) (B) (C) (D) (E)
16	A B C D E	36	A B C D E	56	(A) (B) (C) (D) (E)
17	A B C D E	37	A B C D E	57	(A) (B) (C) (D) (E)
18	A B C D E	38	A B C D E	58	(A) (B) (C) (D) (E)
19	A B C D E	39	A B C D E	59	(A) (B) (C) (D) (E)
20	A B C D E	40	(A) (B) (C) (D) (E)	60	(A) (B) (C) (D) (E)





## Evaluation of CTQP Trainee Session =

Course Title Class	Class Date			Trainee Name (optional)				
Evaluation of Course Content and Presentation	Stronglyee	Moderately	Slightly ce	Slighty	Moderatery	Strongly		
Course Content and Effectiveness	Dis	Dis	Dis	PS.	, P.S.	, 168.		
The course covered all necessary material. The level of detail was appropriate. I learned as much as I expected to learn.	000	000	000	000	000	000		
Presentation								
The course presentation was clear and understandable. The presentation of concepts was well organized.	0	0	0	0	0	0		
Audio-visual Aids								
The videos were effective. The demonstration equipment and materials were effective. Computer slides were of a high quality.	000	0000	00.00	0000	0000	0000		
White board or flip charts (if used) were effective.	0	0		0		0		
Written examination								
The examination covered all presented material adequately. Questions were easy to understand.	0	0	0	0		0		
Proficiency Examinations (if applicable)								
I had enough opportunity for hands-on-practice with testing equipment before the proficiency examination.  Proficiency exams were handled in a fair and	0	0	0	0	0	0		
professional manner.	0	0	0	0	0	0		
Training Environment								
The classroom and support facilities were comfortable. Sessions were conducted without interruptions or other distractions.	0	0	0	0	0	0		
Breaks and lunch periods were adequate. Registration and sign-in were handled in a positive, professional manner.	0	Ö	Ö	Ö	Ö	Ö		
Evaluation of Instructors		145.			ris.			
Instructor 1 (write name)	Stronglyee	Moderately	Slightly ee	Slightly Slightly	Moderately	Strongly		
The instructor demonstrated knowledge of the subject. The instructor effectively used experiences and examples. The instructor's manner and control of the class created	00	0	0	0	00	0		
a positive learning environment. I would choose this instructor for another course.	0	0	0	0	0	0		
nstructor 2—if applicable (write name)								
The instructor demonstrated knowledge of the subject. The instructor effectively used experiences and examples.	0	00	0	0	0	00		
The instructor's manner and control of the class created a positive learning environment.	0	0	0	0	0	0		
I would choose this instructor for another course.	0	Ŏ	Ö	Ŏ	ō	Ö		
Overall Course Rating	1	2	3	4	(5)	<b>6</b>		
As a result of this training, I will change my work habits.	○ Yes	○ No						