



KEEN'S TRUCK DRIVER TRAINING BUNBURY

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Student Evaluation Form

Name: _____

Licence No: _____ Contact Telephone No: _____

Instructor: _____

Please completed the following evaluation by ticking the appropriate box

What class vehicle were you assessed in?	LR	MR	HR	HC	MC	LF
	1 Poor		2 Average		5 Excellent	
	1	2	3	4	5	
How did you find your instructor?						
How did you find the condition of the vehicle supplied for your lesson?						
Were the hours available to you for lessons suitable for your needs?						
How would you rate the service provided by Keen's Truck Driver Training Bunbury as a whole?						
Did you receive sufficient feedback during and after your lesson time?						

Is there any part of the vehicle training approach that you did or did not like? If so what?

Is there anything you could suggest to improve future training services provided by Keen's Truck Driver Training Bunbury?

Do you give permission for any comments made on this sheet to be used on our website? Only first names will be used.
 YES or NO

*Thank you for taking the time to complete this evaluation. Please return to the trainer.
 Your feedback is most appreciated for continuous improvement of our services*