

SANDI KRUISE INSURANCE TRAINING
P.O. Box 786 Bonita, CA 91908
1-800-517-7500
FAX 619-421-8171

COURSE EVALUATION FORM

COURSE DATE: _____ CLASS TITLE: _____

CE STATE: _____

We constantly strive to improve the quality of our materials and presentation skills and ask that you assist us by evaluating the following on a scale of 1 to 10 (1 being the lowest and 10 the highest).

| ITEM | RATING | COMMENTS |
|--|--------|----------|
| MATERIALS | | |
| Were prerequisite materials appropriate? | _____ | _____ |
| Were materials satisfactory? | _____ | _____ |
| Were materials relevant? | _____ | _____ |
| Were materials accurate? | _____ | _____ |

PLEASE ANSWER THESE QUESTIONS YES OR NO

Was the final exam a comprehensive exam on the course material? Yes _____ No _____

Would you recommend this course to other agents? Yes _____ No _____

What helped you the most in this course?

