

Project Coach Session Evaluation

This form should be completed by participants involved in project coaching sessions. It provides an opportunity to evaluate the project coaching experience and gives valuable feedback to the Project Coach to assist in the continuous improvement of this service.

Date of Coaching Session: _____

Name of Project Coach: _____

Name of participant/s: _____

Please indicate a rating for each statement by ticking the relevant box in accordance with the five step rating scale below:

- | | | | |
|--|------------------|--|-----------------|
| 1. I found the coaching session was helpful: | VERY HELPFUL | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | NOT HELPFUL |
| 2. The Project Coach provided a positive environment: | VERY POSITIVE | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | VERY NEGATIVE |
| 3. The Project Coach was keen to assist me: | VERY KEEN | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | NOT KEEN |
| 4. I felt comfortable with the information conveyed: | VERY COMFORTABLE | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | NOT COMFORTABLE |
| 5. The Project Coach demonstrated sound knowledge: | DEFINITELY | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | DEFINITELY NOT |
| 6. I would be happy to utilise this Project Coach again: | YES ALWAYS | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | NO NEVER |

I used this particular Project Coach for the following reasons:

The most useful part of the session was:

The session could have been improved by:

Please provide any further feedback:

Thank you for your valued feedback that will be used to improve our coaching process.

Optional:

Name:

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Date:

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