**Staff feedback form**

On a scale of 1 – 5, please circle the number that best correlates with how much you agree with the statement.

**1= do not agree at all; 2= somewhat agree; 3= hard to tell; 4= mostly agree; 5= completely agree**

1 2 3 4 5

This training helped me to understand the importance of exercise for our residents.

1 2 3 4 5

This training was presented in a clear manner.

1 2 3 4 5

This training was presented in a format that I can understand easily.

1 2 3 4 5

The trainer provided me with the necessary tools to continue to follow through with this program.

1 2 3 4 5

I feel our residents will benefit from doing this exercise class.

Please provide any additional feedback for me to improve the training or the program.

Thank you!