State Of Nevada

Division of Industrial Relations

Mine Safety & Training Section

Email: mines@dir.nv.gov Web Page: http://dir.nv.gov/MSATS/Home/ Instructor Name: Date: Class Description: Location: 1. Please indicate if you agree with the following statements: **Neither Agree or** Strongly Strongly **Disagree** Agree Agree Disagree Disagree Course Material was clear and Understandable Course material was appropriate The pace at which the course material was covered was appropriate Course was beneficial or helpful Instructor was very knowledgeable about the course subjects Instructor was well prepared for the course Classroom location was appropriate Classroom was comfortable 2. How can we improve this course? 3. Does your mine or company employ five or fewer individuals? YES NO While everyone is responsible for safety on the worksite, are you tasked with or serve in a safety position? YES NO 5. General Comments: Name (Optional): Organization/Agency: