

**Washington WIC Program  
Trainer Feedback for Certifier Competency Training**

Agency: \_\_\_\_\_ Name (Optional): \_\_\_\_\_ Date: \_\_\_\_\_

**Learning Center (LC) – LC User Account Form**

What are your suggestions for improvement?

**Webpages– (Learning Center, Certifier Competency Training)**

Was the information clear and complete?  Yes  No

What are your suggestions for improvement?

**Trainer's Guide**

Was the information clear and complete?  Yes  No

What are your suggestions for improvement?

**Certifier Competency Training Worksheets**

Was the information clear and complete?  Yes  No

What are your suggestions for improvement? (Please list the competency area and be specific in your suggestions.)

**Certification Observation Tool**

Was the information clear and complete?  Yes  No

What are your suggestions for improvement?

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**Certifier Competency Training Documentation Form**

Was the information clear and complete?  Yes  No

What are your suggestions for improvement?

**Email – Confirmation: We received Certifier Competency Training Documentation Form**

Was the information clear and complete?  Yes  No

What are your suggestions for improvement?

**Email – Certifier Competency Training has been approved**

Was the information clear and complete?  Yes  No

What are your suggestions for improvement?

**Overall process**

How did this process work for you?

What are your suggestions for improvement?

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## **Assistance**

Did you contact the state staff for support during the training?  Yes  No  
If yes, what support was needed? (LC help, competency documentation, etc.)

Did you receive the support needed?  Yes  No  
If no, what was needed?

## **What other comments would you like to share?**

Send to [WAWICTraining@doh.wa.gov](mailto:WAWICTraining@doh.wa.gov)

For persons with disabilities, this document is available on request in other formats.

To submit a request, please call 1-800-841-1410 (TDD/TYY 711).

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