



**TRACKING STEP BY STEP... JHPTS - VISUAL TRACKING AND TRAINING INC.**

225 Mill Road, Clearwater, Idaho 83552-5116 208-926-4390 joel@jhardin-inc.com www.jhardin-inc.com

**JOEL HARDIN PROFESSIONAL TRACKING SERVICES**  
**Tracking Training Participant Comment Form**

Please complete this form by the end of the course and return it to an Instructor

**Personal Information (optional)**

Name (optional):	Unit or Agency:
Applicable Title (if any):	Status: <input type="checkbox"/> Volunteer <input type="checkbox"/> Paid Employee

**COURSE INFORMATION**

Course Location:	Dates of Course:
How did you learn about this course? <input type="checkbox"/> I saw a flyer or written notice. <input type="checkbox"/> I heard about the course from someone. <input type="checkbox"/> I found it on the Internet. <input type="checkbox"/> I have attended JHPTS courses before. <input type="checkbox"/> I attended an In-House Novice course.	How were you prepared for this course? N/A <input type="checkbox"/> I have other tracking materials. <input type="checkbox"/> I have attended other tracking programs. <input type="checkbox"/> I read materials provided for this course. <input type="checkbox"/> I have attended previous JHPTS courses. <input type="checkbox"/> I train with an In-House tracking program.

**PAST TRACKING EXPERIENCE**

What Tracking experiences have you had in the past <i>two</i> years, prior to this course? <input type="checkbox"/> I have no tracking experience. <input type="checkbox"/> I have attended tracking courses, but have not participated as a tracker on missions. <input type="checkbox"/> I have participated as a trained tracker on SAR or law enforcement missions or operations. <input type="checkbox"/> I am an active Tracking Team Member in my Group or organization.
Indicate from whom you've received previous tracking training, and the month and year when you completed your last tracking training:

**COURSE MATERIAL AND PRESENTATION**

Indicate your reaction to the course material and presentation by checking the box for your choice on a scale of 1-5, 5 being the highest value.	1	2	3	4	5
Did the classroom and field facilities provide a suitable setting for learning?					
Did the course meet the objectives described by the presenter?					
Did the course provide you with increased tracking knowledge as promised?					
Did the course assist with your tracking skill development?					
Was the course material useful in understanding and meeting the learning objectives?					
Was the course presented at a level and pace suitable for your interest and learning?					
Were the methods used in presenting the course interesting and effective to you?					

What comments would you like to share concerning the time, location, physical setting, materials or content of this course?

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**Instructors**

Choose the two Instructors you worked with most often:

Indicate your reaction to the Instructor's skills in presenting this course by checking the box for your choice on a scale of 1-5, 5 being the highest value.

\_\_\_\_\_  
Instructor's Name

\_\_\_\_\_  
Instructor's Name

- Appeared to be prepared
- Appeared to be competent in the subject matter
- Gave clear and concise task instructions
- Encouraged individual and group participation
- Effectively handled the group's questions or problems
- Used visual aids effectively
- Related one topic area to another during the course
- Summarized material to emphasize essential points
- Instructor was respectful, pleasant, and encouraging

1	2	3	4	5

1	2	3	4	5

What comments would you like to share with either Instructor concerning any scored topic above?

What teaching techniques best suited or hindered your ability to learn and why?

**Overall**

Were there any topics not included or not covered sufficiently in this course for your needs? Explain.

What type of training would inspire you to become a more involved tracker?

Are you interested in additional training and, if so, what course(s) would you like to take?