



MABMA Enterprises, LLC

9500 S. Avers Ave. Ste. 5 | Evergreen Park, IL 60805 | (708) 808-7002 | training@mabmaenterprises.com

Course Evaluation Form

Course Title: 20 hour Armed Security Course Date(s): 09/12/2014

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

The Course

Please Circle The Appropriate Box:

	Below Expectation		Average		Exceeded Expectation
1) Course Content Met Your Needs:	1	2	3	4	5
2) Matched Description in Course Guide:	1	2	3	4	5
3) Pace of the Class:	1	2	3	4	5
4) Textbook/Materials/Handouts:	1	2	3	4	5
5) Class Location & Equipment:	1	2	3	4	5

Comments? (Please elaborate) _____

The Instructor

Please Circle The Appropriate Box:

	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	5
2) Preparation for Each Class	1	2	3	4	5
3) Communicated Material Effectively:	1	2	3	4	5
4) Responded Well to Student Questions:	1	2	3	4	5
5) Established Positive Rapport With Students:	1	2	3	4	5

Comments? (Please elaborate) _____

Additional Questions

What did you find was the most valuable part of this course?	<u>Learning about the law</u>
Do you have any suggestions on how we could improve this program?	<u>NO</u>
Other comments?	
Name (Optional):	

May We Use Your Quotes/Comments? YES / NO If Yes, Signature: Leanne Hunt

"No Excuses. Just Solutions."



MABMA Enterprises, LLC

455 West 79th Street | Chicago, IL 60620 | (773) 797-2279 | training@mabmaenterprises.com

Course Evaluation Form

Course Title: UNARSEC Course Date(s): 9-15-14 - 9-17-14

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

The Course

Please Circle The Appropriate Box:

	Below Expectation		Average		Exceeded Expectation
1) Course Content Met Your Needs:	1	2	3	4	5
2) Matched Description in Course Guide:	1	2	3	4	5
3) Pace of the Class:	1	2	3	4	5
4) Textbook/Materials/Handouts:	1	2	3	4	5
5) Class Location & Equipment:	1	2	3	4	5

Comments? (Please elaborate) _____

The Instructor

Please Circle The Appropriate Box:

	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	5
2) Preparation for Each Class	1	2	3	4	5
3) Communicated Material Effectively:	1	2	3	4	5
4) Responded Well to Student Questions:	1	2	3	4	5
5) Established Positive Rapport With Students:	1	2	3	4	5

Comments? (Please elaborate) _____

Additional Questions

What did you find was the most valuable part of this course?	instructor communication w/ students
Do you have any suggestions on how we could improve this program?	Location w/ range
Other comments?	
Name (Optional):	MARCUS JACKSON

May We Use Your Quotes/Comments? YES / NO If Yes, Signature: _____

"No Excuses. Just Solutions."



MABMA Enterprises, LLC

455 West 79th Street | Chicago, IL 60620 | (773) 797-2279 | training@mabmaenterprises.com

Course Evaluation Form

Course Title: Unarmed Security Course Date(s): 9/15 - 9/17

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

The Course

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	Below Expectation		Average		Exceeded Expectation
1) Course Content Met Your Needs:	1	2	3	4	5
2) Matched Description in Course Guide:	1	2	3	4	5
3) Pace of the Class:	1	2	3	4	5
4) Textbook/Materials/Handouts:	1	2	3	4	5
5) Class Location & Equipment:	1	2	3	4	5

Comments? (Please elaborate) _____

The Instructor

Please Circle The Appropriate Box:

	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	5
2) Preparation for Each Class	1	2	3	4	5
3) Communicated Material Effectively:	1	2	3	4	5
4) Responded Well to Student Questions:	1	2	3	4	5
5) Established Positive Rapport With Students:	1	2	3	4	5

Comments? (Please elaborate) _____

Additional Questions

What did you find was the most valuable part of this course?	<u>Details in which Great Details</u>
Do you have any suggestions on how we could improve this program?	<u>NO</u>
Other comments?	
Name (Optional):	

May We Use Your Quotes/Comments? YES/NO If Yes, Signature: Jeyled Jackson

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MABMA Enterprises, LLC

455 West 79th Street | Chicago, IL 60620 | (773) 797-2279 | training@mabmaenterprises.com

Course Evaluation Form

Course Title: Unarmed ^{Security} training Course Course Date(s): 9/15 - 9/17/14

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

The Course

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	Below Expectation		Average		Exceeded Expectation
1) Course Content Met Your Needs:	1	2	3	4	5
2) Matched Description in Course Guide:	1	2	3	4	5
3) Pace of the Class:	1	2	3	4	5
4) Textbook/Materials/Handouts:	1	2	3	4	5
5) Class Location & Equipment:	1	2	3	4	5

Comments? (Please elaborate) _____

The Instructor

Please Circle The Appropriate Box:

	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	5
2) Preparation for Each Class	1	2	3	4	5
3) Communicated Material Effectively:	1	2	3	4	5
4) Responded Well to Student Questions:	1	2	3	4	5
5) Established Positive Rapport With Students:	1	2	3	4	5

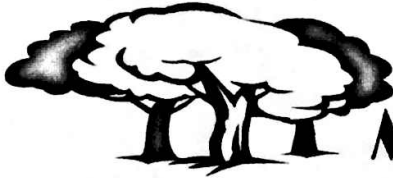
Comments? (Please elaborate) _____

Additional Questions

What did you find was the most valuable part of this course?	<u>Lots of hands on training Good Instructor.</u>
Do you have any suggestions on how we could improve this program?	<u>Program is good no changes needed</u>
Other comments?	
Name (Optional):	<u>Edgar Vergara</u>

May We Use Your Quotes/Comments? YES / NO If Yes, Signature: _____

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MABMA Enterprises, LLC

455 West 79th Street | Chicago, IL 60620 | (773) 797-2279 | training@mabmaenterprises.com

Course Evaluation Form

Course Title: The Unarmed Security Course Course Date(s): 9/15 - 9/17/2014

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

The Course

Please Circle The Appropriate Box:

	Below Expectation		Average		Exceeded Expectation
1) Course Content Met Your Needs:	1	2	3	4	5
2) Matched Description in Course Guide:	1	2	3	4	5
3) Pace of the Class:	1	2	3	4	5
4) Textbook/Materials/Handouts:	1	2	3	4	5
5) Class Location & Equipment:	1	2	3	4	5

Comments? (Please elaborate) None

The Instructor

Please Circle The Appropriate Box:

	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	5
2) Preparation for Each Class	1	2	3	4	5
3) Communicated Material Effectively:	1	2	3	4	5
4) Responded Well to Student Questions:	1	2	3	4	5
5) Established Positive Rapport With Students:	1	2	3	4	5

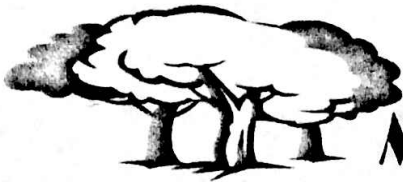
Comments? (Please elaborate) None

Additional Questions

What did you find was the most valuable part of this course?	The extended knowledge of the instructor in all scenarios of law enforcement.
Do you have any suggestions on how we could improve this program?	None negative. Just keep up the good work and animated teaching style which makes learning easy and simple to grasp.
Other comments?	None
Name (Optional):	Angelo Darby

May We Use Your Quotes/Comments? YES / NO If Yes, Signature: Angelo Darby

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MABMA Enterprises, LLC

455 West 79th Street | Chicago, IL 60620 | (773) 797-2279 | training@mabmaenterprises.com

Course Evaluation Form

Course Title: Armed Security Course Course Date(s): 9-17-14-9-19-14

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

<u>The Course</u> Please Circle The Appropriate Box:	Below Expectation		Average		Exceeded Expectation
1) Course Content Met Your Needs:	1	2	3	4	5
2) Matched Description in Course Guide:	1	2	3	4	5
3) Pace of the Class:	1	2	3	4	5
4) Textbook/Materials/Handouts:	1	2	3	4	5
5) Class Location & Equipment:	1	2	3	4	5

Comments? (Please elaborate) _____

<u>The Instructor</u> Please Circle The Appropriate Box:	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	5
2) Preparation for Each Class	1	2	3	4	5
3) Communicated Material Effectively:	1	2	3	4	5
4) Responded Well to Student Questions:	1	2	3	4	5
5) Established Positive Rapport With Students:	1	2	3	4	5

Comments? (Please elaborate) _____

Additional Questions

What did you find was the most valuable part of this course?	The learning of how to handle handgun.
Do you have any suggestions on how we could improve this program?	None as of now.
Other comments?	
Name (Optional):	

May We Use Your Quotes/Comments? YES / NO If Yes, Signature: Waldemar S.

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Course Evaluation Form

Course Title: Armed Security Course Course Date(s): 9/17 - 9/19/2014

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The Course

Please Circle The Appropriate Box:

	Below Expectation		Average		Exceeded Expectation
1) Course Content Met Your Needs:	1	2	3	4	(5)
2) Matched Description in Course Guide:	1	2	3	4	(5)
3) Pace of the Class:	1	2	3	4	(5)
4) Textbook/Materials/Handouts:	1	2	3	4	(5)
5) Class Location & Equipment:	1	2	3	(4)	5

Comments? (Please elaborate) Extensively Enriching Information.

The Instructor

Please Circle The Appropriate Box:

	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	(5)
2) Preparation for Each Class	1	2	3	4	(5)
3) Communicated Material Effectively:	1	2	3	4	(5)
4) Responded Well to Student Questions:	1	2	3	4	(5)
5) Established Positive Rapport With Students:	1	2	3	4	(5)

Comments? (Please elaborate) Greatly appreciated the seriousness of the course delivery without being dry and boring.

Additional Questions

What did you find was the most valuable part of this course?	<u>Learning how to properly handle a firearm in various situations.</u>
Do you have any suggestions on how we could improve this program?	<u>None -</u>
Other comments?	
Name (Optional):	<u>Angelo Darby</u>

May We Use Your Quotes/Comments? (YES) / NO If Yes, Signature: Angelo Darby

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Course Evaluation Form

Course Title: Armed Security Course Course Date(s): 9-17-14 - 9-19-14

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1) Course Content Met Your Needs:	1	2	3	4	5
2) Matched Description in Course Guide:	1	2	3	4	5
3) Pace of the Class:	1	2	3	4	5
4) Textbook/Materials/Handouts:	1	2	3	4	5
5) Class Location & Equipment:	1	2	3	4	5

Comments? (Please elaborate) _____

The Instructor

Please Circle The Appropriate Box:

	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	5
2) Preparation for Each Class	1	2	3	4	5
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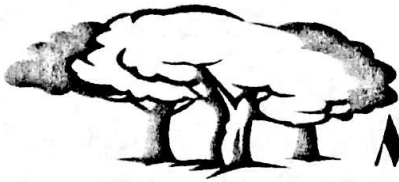
Comments? (Please elaborate) _____

Additional Questions

What did you find was the most valuable part of this course?	<u>Instructor: student interaction</u>
Do you have any suggestions on how we could improve this program?	<u>Great job thus far.</u>
Other comments?	
Name (Optional):	

May We Use Your Quotes/Comments? YES / NO If Yes, Signature: [Signature]

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MABMA Enterprises, LLC

455 West 79th Street | Chicago, IL 60620 | (773) 797-2279 | training@mabmaenterprises.com

Course Evaluation Form

Course Title: Security Course Date(s): 9-20-2014

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

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	Below Expectation		Average		Exceeded Expectation
1) Course Content Met Your Needs:	1	2	3	4	5
2) Matched Description in Course Guide:	1	2	3	4	5
3) Pace of the Class:	1	2	3	4	5
4) Textbook/Materials/Handouts:	1	2	3	4	5
5) Class Location & Equipment:	1	2	3	4	5

Comments? (Please elaborate) Mr. Brown is well educated in what He do, over all my experience in the class was Amazing

The Instructor

Please Circle The Appropriate Box:

	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	5
2) Preparation for Each Class	1	2	3	4	5
3) Communicated Material Effectively:	1	2	3	4	5
4) Responded Well to Student Questions:	1	2	3	4	5
5) Established Positive Rapport With Students:	1	2	3	4	5

Comments? (Please elaborate) _____

Additional Questions

What did you find was the most valuable part of this course?	<u>I would say the most valuable part of this course was how Mr Brown gave us Real life events,</u>
Do you have any suggestions on how we could improve this program?	<u>I would say nothing</u>
Other comments?	
Name (Optional):	

May We Use Your Quotes/Comments? YES NO If Yes, Signature: Tina Sampson

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MABMA Enterprises, LLC

455 West 79th Street | Chicago, IL 60620 | (773) 797-2279 | training@mabmaenterprises.com

Course Evaluation Form

Course Title: Unarmed Security Course Date(s): 9-20/9-21

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

The Course

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	Below Expectation		Average		Exceeded Expectation
1) Course Content Met Your Needs:	1	2	3	4	5
2) Matched Description in Course Guide:	1	2	3	4	5
3) Pace of the Class:	1	2	3	4	5
4) Textbook/Materials/Handouts:	1	2	3	4	5
5) Class Location & Equipment:	1	2	3	4	5

Comments? (Please elaborate) _____

The Instructor

Please Circle The Appropriate Box:

	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	5
2) Preparation for Each Class	1	2	3	4	5
3) Communicated Material Effectively:	1	2	3	4	5
4) Responded Well to Student Questions:	1	2	3	4	5
5) Established Positive Rapport With Students:	1	2	3	4	5

Comments? (Please elaborate) Had alot of energy and kept class awake

Additional Questions

What did you find was the most valuable part of this course?	<u>Learn the unlawful and lawful things in security</u>
Do you have any suggestions on how we could improve this program?	<u>I believe more extras to keep students involed or role playing.</u>
Other comments?	
Name (Optional):	<u>Doris Johnson</u>

May We Use Your Quotes/Comments? YES / NO If Yes, Signature: Doris Johnson

"No Excuses. Just Solutions."



MABMA Enterprises, LLC

455 West 79th Street | Chicago, IL 60620 | (773) 797-2279 | training@mabmaenterprises.com

Course Evaluation Form

Course Title: Unarmed Security Course Course Date(s): September 20-21, 2014

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

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	Below Expectation		Average		Exceeded Expectation
1) Course Content Met Your Needs:	1	2	3	4	5
2) Matched Description in Course Guide:	1	2	3	4	5
3) Pace of the Class:	1	2	3	4	5
4) Textbook/Materials/Handouts:	1	2	3	4	5
5) Class Location & Equipment:	1	2	3	4	5

Comments? (Please elaborate) _____

The Instructor

Please Circle The Appropriate Box:

	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	5
2) Preparation for Each Class	1	2	3	4	5
3) Communicated Material Effectively:	1	2	3	4	5
4) Responded Well to Student Questions:	1	2	3	4	5
5) Established Positive Rapport With Students:	1	2	3	4	5

Comments? (Please elaborate) _____

Additional Questions

What did you find was the most valuable part of this course?	The most valuable parts of the course are knowing the law and safety procedures.
Do you have any suggestions on how we could improve this program?	No, everything was perfect.
Other comments?	
Name (Optional):	

May We Use Your Quotes/Comments? YES / NO If Yes, Signature: Nathaniel Shroyer

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MABMA Enterprises, LLC

455 West 79th Street | Chicago, IL 60620 | (773) 797-2279 | training@mabmaenterprises.com

Course Evaluation Form

Course Title: Unarmed Security Course Date(s): 9-22 | 9-24

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

The Course

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	Below Expectation		Average		Exceeded Expectation
1) Course Content Met Your Needs:	1	2	3	4	5
2) Matched Description in Course Guide:	1	2	3	4	5
3) Pace of the Class:	1	2	3	4	5
4) Textbook/Materials/Handouts:	1	2	3	4	5
5) Class Location & Equipment:	1	2	3	4	5

Comments? (Please elaborate) Information pertaining to course was very helpful and understandable.

The Instructor

Please Circle The Appropriate Box:

	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	5
2) Preparation for Each Class	1	2	3	4	5
3) Communicated Material Effectively:	1	2	3	4	5
4) Responded Well to Student Questions:	1	2	3	4	5
5) Established Positive Rapport With Students:	1	2	3	4	5

Comments? (Please elaborate) Instructor was very knowl^{edg}able of material and was able to communicate effectively

Additional Questions

What did you find was the most valuable part of this course?	
Do you have any suggestions on how we could improve this program?	
Other comments?	
Name (Optional):	

May We Use Your Quotes/Comments? (YES) NO If Yes, Signature: Gianna Williams

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MABMA Enterprises, LLC

455 West 79th Street | Chicago, IL 60620 | (773) 797-2279 | training@mabmaenterprises.com

Course Evaluation Form

Course Title: UnArmed Security Courses Course Date(s): 09/24/2014

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

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4) Textbook/Materials/Handouts:	1	2	3	4	5
5) Class Location & Equipment:	1	2	3	4	5

Comments? (Please elaborate) _____

The Instructor

Please Circle The Appropriate Box:

	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	5
2) Preparation for Each Class	1	2	3	4	5
3) Communicated Material Effectively:	1	2	3	4	5
4) Responded Well to Student Questions:	1	2	3	4	5
5) Established Positive Rapport With Students:	1	2	3	4	5

Comments? (Please elaborate) _____

Additional Questions

What did you find was the most valuable part of this course?	Most valuable was having a instructor that gave information in depth!
Do you have any suggestions on how we could improve this program?	
Other comments?	
Name (Optional):	

May We Use Your Quotes/Comments? YES NO If Yes, Signature: Sikaula White

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MABMA Enterprises, LLC

455 West 79th Street | Chicago, IL 60620 | (773) 797-2279 | training@mabmaenterprises.com

Course Evaluation Form

Course Title: Unarmed Security Course Date(s): 9/22-9/24

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

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3) Pace of the Class:	1	2	3	4	5
4) Textbook/Materials/Handouts:	1	2	3	4	5
5) Class Location & Equipment:	1	2	3	4	5

Comments? (Please elaborate) reminds me of Kevin Hart. great class

The Instructor

Please Circle The Appropriate Box:

	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	5
2) Preparation for Each Class	1	2	3	4	5
3) Communicated Material Effectively:	1	2	3	4	5
4) Responded Well to Student Questions:	1	2	3	4	5
5) Established Positive Rapport With Students:	1	2	3	4	5

Comments? (Please elaborate) I learned alot, very informational. would take class again.

Additional Questions

What did you find was the most valuable part of this course?	<u>Everything</u>
Do you have any suggestions on how we could improve this program?	<u>NA</u>
Other comments?	
Name (Optional):	

May We Use Your Quotes/Comments? YES NO If Yes, Signature: Gator Moore

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Course Evaluation Form

Course Title: Unarmed Security Course Date(s): 9/22/14 - 9/24/14

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

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3) Pace of the Class:	1	2	3	4	5
4) Textbook/Materials/Handouts:	1	2	3	4	5
5) Class Location & Equipment:	1	2	3	4	5

Comments? (Please elaborate) I really enjoyed the class, he explained everything in detail. The location was very easy to find.

The Instructor

Please Circle The Appropriate Box:

	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	5
2) Preparation for Each Class	1	2	3	4	5
3) Communicated Material Effectively:	1	2	3	4	5
4) Responded Well to Student Questions:	1	2	3	4	5
5) Established Positive Rapport With Students:	1	2	3	4	5

Comments? (Please elaborate) _____

Additional Questions

What did you find was the most valuable part of this course?	<u>The most valuable part of this class was learning the law.</u>
Do you have any suggestions on how we could improve this program?	
Other comments?	
Name (Optional):	

May We Use Your Quotes/Comments? YES / NO If Yes, Signature: Perius Coleman

"No Excuses. Just Solutions."



MABMA Enterprises, LLC

455 West 79th Street | Chicago, IL 60620 | (773) 797-2279 | training@mabmaenterprises.com

Course Evaluation Form

Course Title: Unarmed Security Course Course Date(s): _____

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

The Course
Please Circle The Appropriate Box:

	Below Expectation	Average	Exceeded Expectation
1) Course Content Met Your Needs:	1	2	3 4 <u>5</u>
2) Matched Description in Course Guide:	1	2	3 4 <u>5</u>
3) Pace of the Class:	1	2	3 4 <u>5</u>
4) Textbook/Materials/Handouts:	1	2	3 4 <u>5</u>
5) Class Location & Equipment:	1	2	3 4 <u>5</u>

Comments? (Please elaborate) Great!!

The Instructor
Please Circle The Appropriate Box:

	Poor	Average	Excellent
1) Knowledge of the Subject Matter:	1	2 3	4 <u>5</u>
2) Preparation for Each Class	1	2 3	4 <u>5</u>
3) Communicated Material Effectively:	1	2 3	4 <u>5</u>
4) Responded Well to Student Questions:	1	2 3	4 <u>5</u>
5) Established Positive Rapport With Students:	1	2 3	4 <u>5</u>

Comments? (Please elaborate) Great!!

Additional Questions

What did you find was the most valuable part of this course?	<u>Learning how to safely operate a firearm.</u>
Do you have any suggestions on how we could improve this program?	
Other comments?	<u>This class is very Great i took unarmed and this class just gets better and better.</u>
Name (Optional):	

May We Use Your Quotes/Comments? YES / NO If Yes, Signature: Derius Coleman

"No Excuses. Just Solutions."



MABMA Enterprises, LLC

455 West 79th Street | Chicago, IL 60620 | (773) 797-2279 | training@mabmaenterprises.com

Course Evaluation Form

Course Title: Unarmed Security Course Date(s): 9-22 | 9-24

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

The Course

Please Circle The Appropriate Box:

	Below Expectation		Average		Exceeded Expectation
1) Course Content Met Your Needs:	1	2	3	4	5
2) Matched Description in Course Guide:	1	2	3	4	5
3) Pace of the Class:	1	2	3	4	5
4) Textbook/Materials/Handouts:	1	2	3	4	5
5) Class Location & Equipment:	1	2	3	4	5

Comments? (Please elaborate) Information pertaining to course was very helpful and understandable.

The Instructor

Please Circle The Appropriate Box:

	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	5
2) Preparation for Each Class	1	2	3	4	5
3) Communicated Material Effectively:	1	2	3	4	5
4) Responded Well to Student Questions:	1	2	3	4	5
5) Established Positive Rapport With Students:	1	2	3	4	5

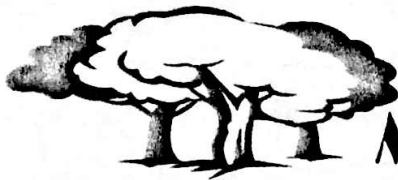
Comments? (Please elaborate) Instructor was very ~~knowl~~^{8w} knowledgeable of material and was able to communicate effectively

Additional Questions

What did you find was the most valuable part of this course?	
Do you have any suggestions on how we could improve this program?	
Other comments?	
Name (Optional):	

May We Use Your Quotes/Comments? (YES) NO If Yes, Signature: Gianna Williams

"No Excuses. Just Solutions."



MABMA Enterprises, LLC

455 West 79th Street | Chicago, IL 60620 | (773) 797-2279 | training@mabmaenterprises.com

Course Evaluation Form

Course Title: ~~TK~~ Armed Security Course Date(s): 09/24/2014

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

<u>The Course</u> Please Circle The Appropriate Box:	Below Expectation		Average		Exceeded Expectation
1) Course Content Met Your Needs:	1	2	3	4	5
2) Matched Description in Course Guide:	1	2	3	4	5
3) Pace of the Class:	1	2	3	4	5
4) Textbook/Materials/Handouts:	1	2	3	4	5
5) Class Location & Equipment:	1	2	3	4	5

Comments? (Please elaborate) _____

<u>The Instructor</u> Please Circle The Appropriate Box:	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	5
2) Preparation for Each Class	1	2	3	4	5
3) Communicated Material Effectively:	1	2	3	4	5
4) Responded Well to Student Questions:	1	2	3	4	5
5) Established Positive Rapport With Students:	1	2	3	4	5

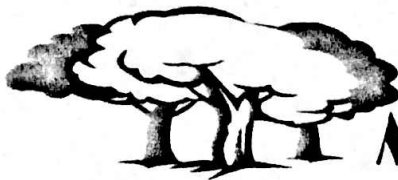
Comments? (Please elaborate) _____

Additional Questions

What did you find was the most valuable part of this course?	Role Playing
Do you have any suggestions on how we could improve this program?	I think we should practice more on the instructor when using handcuff (unarm class)
Other comments?	
Name (Optional):	Tikaila White

May We Use Your Quotes/Comments? YES / NO If Yes, Signature: Tikaila White

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MABMA Enterprises, LLC

455 West 79th Street | Chicago, IL 60620 | (773) 797-2279 | training@mabmaenterprises.com

Course Evaluation Form

Course Title: Armed Security Course Course Date(s): 9-23-14 to 9-26-14

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

The Course

Please Circle The Appropriate Box:

	Below Expectation	Average	Exceeded Expectation
1) Course Content Met Your Needs:	1	2	3
2) Matched Description in Course Guide:	1	2	3
3) Pace of the Class:	1	2	3
4) Textbook/Materials/Handouts:	1	2	3
5) Class Location & Equipment:	1	2	3

Comments? (Please elaborate) I Know by taking this course I'm gonna make a great security officer Mike taught it well!!!

The Instructor

Please Circle The Appropriate Box:

	Poor	Average	Excellent
1) Knowledge of the Subject Matter:	1	2	3
2) Preparation for Each Class	1	2	3
3) Communicated Material Effectively:	1	2	3
4) Responded Well to Student Questions:	1	2	3
5) Established Positive Rapport With Students:	1	2	3

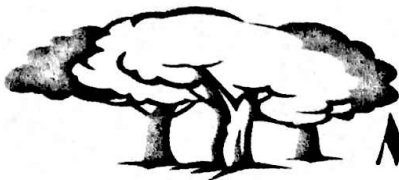
Comments? (Please elaborate) Taught everything so I could understand which mean alot GREAT Job

Additional Questions

What did you find was the most valuable part of this course?	<u>I like when I learned about some of laws Do & Don't very helpful</u>
Do you have any suggestions on how we could improve this program?	<u>I'm very satisfied I learned alot and the information obtained I'm gladly put it to use</u>
Other comments?	<u>I'm glad I took this course</u>
Name (Optional):	

May We Use Your Quotes/Comments? (YES) NO If Yes, Signature: Michael Smith

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MABMA Enterprises, LLC

455 West 79th Street | Chicago, IL 60620 | (773) 797-2279 | training@mabmaenterprises.com

Course Evaluation Form

Course Title: ARMED Security Cours Course Date(s): 9/23/14 - 9/26/14

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

The Course

Please Circle The Appropriate Box:

	Below Expectation		Average		Exceeded Expectation
1) Course Content Met Your Needs:	1	2	3	4	5
2) Matched Description in Course Guide:	1	2	3	4	5
3) Pace of the Class:	1	2	3	4	5
4) Textbook/Materials/Handouts:	1	2	3	4	5
5) Class Location & Equipment:	1	2	3	4	5

Comments? (Please elaborate) Everything needed was there. I notice certain things taught that the instructor leads by example.

The Instructor

Please Circle The Appropriate Box:

	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	5
2) Preparation for Each Class	1	2	3	4	5
3) Communicated Material Effectively:	1	2	3	4	5
4) Responded Well to Student Questions:	1	2	3	4	5
5) Established Positive Rapport With Students:	1	2	3	4	5

Comments? (Please elaborate) Very professional, would not let you do anything wrong. Took time to answer questions.

Additional Questions

What did you find was the most valuable part of this course?	<u>Things that was taught to implement in my everyday life.</u>
Do you have any suggestions on how we could improve this program?	<u>Everything good here has excellent plan for business.</u>
Other comments?	<u>This young man will go far. Encourage anyone who wants to learn go to MABMA Enterprises.</u>
Name (Optional):	

May We Use Your Quotes/Comments? YES / NO If Yes, Signature: [Signature]

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MABMA Enterprises, LLC

455 West 79th Street | Chicago, IL 60620 | (773) 797-2279 | training@mabmaenterprises.com

Course Evaluation Form

Course Title: Armed Security

Course Date(s): 9-28-14

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

The Course

Please Circle The Appropriate Box:

	Below Expectation		Average		Exceeded Expectation
1) Course Content Met Your Needs:	1	2	3	4	5
2) Matched Description in Course Guide:	1	2	3	4	5
3) Pace of the Class:	1	2	3	4	5
4) Textbook/Materials/Handouts:	1	2	3	4	5
5) Class Location & Equipment:	1	2	3	4	5

Comments? (Please elaborate) Job very well done in getting class up and ~~and~~ in doing activity.

The Instructor

Please Circle The Appropriate Box:

	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	5
2) Preparation for Each Class	1	2	3	4	5
3) Communicated Material Effectively:	1	2	3	4	5
4) Responded Well to Student Questions:	1	2	3	4	5
5) Established Positive Rapport With Students:	1	2	3	4	5

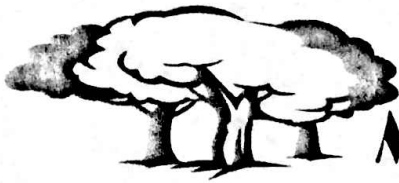
Comments? (Please elaborate) _____

Additional Questions

What did you find was the most valuable part of this course?	<u>How to use a gun properly.</u>
Do you have any suggestions on how we could improve this program?	
Other comments?	
Name (Optional):	

May We Use Your Quotes/Comments? YES / NO If Yes, Signature: Doris Johnson

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MABMA Enterprises, LLC

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Course Evaluation Form

Course Title: ARMED SECURITY Course Course Date(s): 9/27/14 - 9/28/14

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

The Course
Please Circle The Appropriate Box:

	Below Expectation		Average		Exceeded Expectation
1) Course Content Met Your Needs:	1	2	3	4	5
2) Matched Description in Course Guide:	1	2	3	4	5
3) Pace of the Class:	1	2	3	4	5
4) Textbook/Materials/Handouts:	1	2	3	4	5
5) Class Location & Equipment:	1	2	3	4	5

Comments? (Please elaborate) I will definitely be recommending this class to others.

The Instructor
Please Circle The Appropriate Box:

	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	5
2) Preparation for Each Class	1	2	3	4	5
3) Communicated Material Effectively:	1	2	3	4	5
4) Responded Well to Student Questions:	1	2	3	4	5
5) Established Positive Rapport With Students:	1	2	3	4	5

Comments? (Please elaborate) _____

Additional Questions

What did you find was the most valuable part of this course?	<u>The tools used. I liked how I was able to get clear understandings of the course.</u>
Do you have any suggestions on how we could improve this program?	
Other comments?	
Name (Optional):	

May We Use Your Quotes/Comments? YES/ NO If Yes, Signature: 

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MABMA Enterprises, LLC

455 West 79th Street | Chicago, IL 60620 | (773) 797-2279 | training@mabmaenterprises.com

Course Evaluation Form

Course Title: unarmed Course Date(s): 9/29 - 10/3/2014

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

The Course

Please Circle The Appropriate Box:

	Below Expectation		Average		Exceeded Expectation
1) Course Content Met Your Needs:	1	2	3	4	5
2) Matched Description in Course Guide:	1	2	3	4	5
3) Pace of the Class:	1	2	3	4	5
4) Textbook/Materials/Handouts:	1	2	3	4	5
5) Class Location & Equipment:	1	2	3	4	5

Comments? (Please elaborate) _____

The Instructor

Please Circle The Appropriate Box:

	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	5
2) Preparation for Each Class	1	2	3	4	5
3) Communicated Material Effectively:	1	2	3	4	5
4) Responded Well to Student Questions:	1	2	3	4	5
5) Established Positive Rapport With Students:	1	2	3	4	5

Comments? (Please elaborate) _____

Additional Questions

What did you find was the most valuable part of this course?	EVERYTHING
Do you have any suggestions on how we could improve this program?	NO.
Other comments?	
Name (Optional):	

May We Use Your Quotes/Comments? YES/NO If Yes, Signature:

Jessica Cooley

"No Excuses. Just Solutions."



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Course Evaluation Form

Course Title: Unarmed Security Course Course Date(s): 9/30 - 10/2

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

The Course

Please Circle The Appropriate Box:

	Below Expectation		Average		Exceeded Expectation
1) Course Content Met Your Needs:	1	2	3	4	5
2) Matched Description in Course Guide:	1	2	3	4	5
3) Pace of the Class:	1	2	3	4	5
4) Textbook/Materials/Handouts:	1	2	3	4	5
5) Class Location & Equipment:	1	2	3	4	5

Comments? (Please elaborate) _____

The Instructor

Please Circle The Appropriate Box:

	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	5
2) Preparation for Each Class	1	2	3	4	5
3) Communicated Material Effectively:	1	2	3	4	5
4) Responded Well to Student Questions:	1	2	3	4	5
5) Established Positive Rapport With Students:	1	2	3	4	5

Comments? (Please elaborate) _____

Additional Questions

What did you find was the most valuable part of this course?	Learning about the law
Do you have any suggestions on how we could improve this program?	Make the class more hands on.
Other comments?	
Name (Optional):	

May We Use Your Quotes/Comments? YES / NO If Yes, Signature: Frank Lippi

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MABMA Enterprises, LLC

455 West 79th Street | Chicago, IL 60620 | (773) 797-2279 | training@mabmaenterprises.com

Course Evaluation Form

Course Title: unarmed security course Course Date(s): 9/31 - 10/1/14

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

The Course

Please Circle The Appropriate Box:

	Below Expectation		Average		Exceeded Expectation
1) Course Content Met Your Needs:	1	2	3	4	5
2) Matched Description in Course Guide:	1	2	3	4	5
3) Pace of the Class:	1	2	3	4	5
4) Textbook/Materials/Handouts:	1	2	3	4	5
5) Class Location & Equipment:	1	2	3	4	5

Comments? (Please elaborate) _____

The Instructor

Please Circle The Appropriate Box:

	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	5
2) Preparation for Each Class	1	2	3	4	5
3) Communicated Material Effectively:	1	2	3	4	5
4) Responded Well to Student Questions:	1	2	3	4	5
5) Established Positive Rapport With Students:	1	2	3	4	5

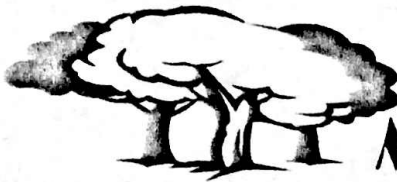
Comments? (Please elaborate) _____

Additional Questions

What did you find was the most valuable part of this course?	<i>Interaction</i>
Do you have any suggestions on how we could improve this program?	<i>none</i>
Other comments?	
Name (Optional):	<i>none</i>

May We Use Your Quotes/Comments? YES / NO If Yes, Signature: Alonso Brooks Jr.

"No Excuses. Just Solutions."



MABMA Enterprises, LLC

455 West 79th Street | Chicago, IL 60620 | (773) 797-2279 | training@mabmaenterprises.com

Course Evaluation Form

Course Title: Unarmed Security Course Course Date(s): 09/29/14/ - 10/01/2014

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

The Course

Please Circle The Appropriate Box:

	Below Expectation		Average		Exceeded Expectation
1) Course Content Met Your Needs:	1	2	3	4	5
2) Matched Description in Course Guide:	1	2	3	4	5
3) Pace of the Class:	1	2	3	4	5
4) Textbook/Materials/Handouts:	1	2	3	4	5
5) Class Location & Equipment:	1	2	3	4	5

Comments? (Please elaborate) Class was great and fun to learn

The Instructor

Please Circle The Appropriate Box:

	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	5
2) Preparation for Each Class	1	2	3	4	5
3) Communicated Material Effectively:	1	2	3	4	5
4) Responded Well to Student Questions:	1	2	3	4	5
5) Established Positive Rapport With Students:	1	2	3	4	5

Comments? (Please elaborate) _____

Additional Questions

What did you find was the most valuable part of this course?	<u>obtaining knowledge on unarmed security</u>
Do you have any suggestions on how we could improve this program?	<u>N/A</u>
Other comments?	
Name (Optional):	<u>N/A</u>

May We Use Your Quotes/Comments? YES / NO If Yes, Signature: [Signature]

"No Excuses. Just Solutions."



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455 West 79th Street | Chicago, IL 60620 | (773) 797-2279 | training@mabmaenterprises.com

Course Evaluation Form

Course Title: UNArmed Security C Course Date(s): 9-29-14 - 10-1-14

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

The Course

Please Circle The Appropriate Box:

	Below Expectation		Average		Exceeded Expectation
1) Course Content Met Your Needs:	1	2	3	4	(5)
2) Matched Description in Course Guide:	1	2	3	4	(5)
3) Pace of the Class:	1	2	3	4	(5)
4) Textbook/Materials/Handouts:	1	2	3	4	(5)
5) Class Location & Equipment:	1	2	3	4	(5)

Comments? (Please elaborate) Very Nice + Patientk, also
Great Instructor

The Instructor

Please Circle The Appropriate Box:

	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	(5)
2) Preparation for Each Class	1	2	3	4	(5)
3) Communicated Material Effectively:	1	2	3	4	(5)
4) Responded Well to Student Questions:	1	2	3	4	(5)
5) Established Positive Rapport With Students:	1	2	3	4	(5)

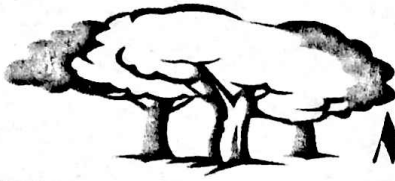
Comments? (Please elaborate) il

Additional Questions

What did you find was the most valuable part of this course?	<u>The Instructor Patients</u>
Do you have any suggestions on how we could improve this program?	<u>NO</u>
Other comments?	
Name (Optional):	<u>Victoria Gardner</u>

May We Use Your Quotes/Comments? (YES) / NO If Yes, Signature: _____

"No Excuses. Just Solutions."



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Course Evaluation Form

Course Title: Unarmed security course Course Date(s): 9/29-10/1/14

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

The Course

Please Circle The Appropriate Box:

	Below Expectation		Average		Exceeded Expectation
1) Course Content Met Your Needs:	1	2	3	4	5
2) Matched Description in Course Guide:	1	2	3	4	5
3) Pace of the Class:	1	2	3	4	5
4) Textbook/Materials/Handouts:	1	2	3	4	5
5) Class Location & Equipment:	1	2	3	4	5

Comments? (Please elaborate) I learned well and he is a good trainer

The Instructor

Please Circle The Appropriate Box:

	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	5
2) Preparation for Each Class	1	2	3	4	5
3) Communicated Material Effectively:	1	2	3	4	5
4) Responded Well to Student Questions:	1	2	3	4	5
5) Established Positive Rapport With Students:	1	2	3	4	5

Comments? (Please elaborate) _____

Additional Questions

What did you find was the most valuable part of this course?	<u>The way he was training</u>
Do you have any suggestions on how we could improve this program?	
Other comments?	
Name (Optional):	

May We Use Your Quotes/Comments? YES / NO If Yes, Signature: Brandon Warthem

He was a good trainer and I enjoyed him.

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Course Evaluation Form

Course Title: unarmed security Course Date(s): 9-29-14

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

The Course

Please Circle The Appropriate Box:

	Below Expectation		Average		Exceeded Expectation
1) Course Content Met Your Needs:	1	2	3	4	5
2) Matched Description in Course Guide:	1	2	3	4	5
3) Pace of the Class:	1	2	3	4	5
4) Textbook/Materials/Handouts:	1	2	3	4	5
5) Class Location & Equipment:	1	2	3	4	5

Comments? (Please elaborate) _____

The Instructor

Please Circle The Appropriate Box:

	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	5
2) Preparation for Each Class	1	2	3	4	5
3) Communicated Material Effectively:	1	2	3	4	5
4) Responded Well to Student Questions:	1	2	3	4	5
5) Established Positive Rapport With Students:	1	2	3	4	5

Comments? (Please elaborate) Your A Great teacher job well done

Additional Questions

What did you find was the most valuable part of this course?	
Do you have any suggestions on how we could improve this program?	
Other comments?	
Name (Optional):	

May We Use Your Quotes/Comments? (YES) / NO If Yes, Signature: Michael Smith

"No Excuses. Just Solutions."



MABMA Enterprises, LLC

455 West 79th Street | Chicago, IL 60620 | (773) 797-2279 | training@mabmaenterprises.com

Course Evaluation Form

Course Title: Unarmed Security Course Course Date(s): 9/29/14/10/1/14

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

The Course

Please Circle The Appropriate Box:

	Below Expectation		Average		Exceeded Expectation
1) Course Content Met Your Needs:	1	2	3	4	5
2) Matched Description in Course Guide:	1	2	3	4	5
3) Pace of the Class:	1	2	3	4	5
4) Textbook/Materials/Handouts:	1	2	3	4	5
5) Class Location & Equipment:	1	2	3	4	5

Comments? (Please elaborate) _____

The Instructor

Please Circle The Appropriate Box:

	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	5
2) Preparation for Each Class	1	2	3	4	5
3) Communicated Material Effectively:	1	2	3	4	5
4) Responded Well to Student Questions:	1	2	3	4	5
5) Established Positive Rapport With Students:	1	2	3	4	5

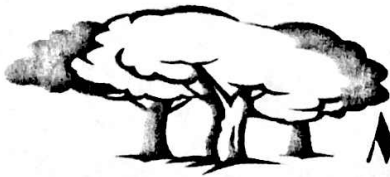
Comments? (Please elaborate) _____

Additional Questions

What did you find was the most valuable part of this course?	<u>Very thorough</u>
Do you have any suggestions on how we could improve this program?	
Other comments?	
Name (Optional):	

May We Use Your Quotes/Comments? (YES) / NO If Yes, Signature: Kimberly Gruber

"No Excuses. Just Solutions."



MABMA Enterprises, LLC

455 West 79th Street | Chicago, IL 60620 | (773) 797-2279 | training@mabmaenterprises.com

Course Evaluation Form

Course Title: UnArmed Security Course Course Date(s): 9/29/14 - 10/1/14

Please take a few moments to answer the following questions, which will be used to assist us in learning about if our course/instructor has met your security and/or concealed carry training needs. This form will also be used to evaluate the quality assurance of our training programs and to improve the quality of instruction, education and training provided to you: the customer. On behalf of the MABMA Enterprises, LLC, we thank you!

The Course

Please Circle The Appropriate Box:

	Below Expectation		Average		Exceeded Expectation
1) Course Content Met Your Needs:	1	2	3	4	5
2) Matched Description in Course Guide:	1	2	3	4	5
3) Pace of the Class:	1	2	3	4	5
4) Textbook/Materials/Handouts:	1	2	3	4	5
5) Class Location & Equipment:	1	2	3	4	5

Comments? (Please elaborate) Course exceeded expectation in way we were taught lesson it was well explained

The Instructor

Please Circle The Appropriate Box:

	Poor		Average		Excellent
1) Knowledge of the Subject Matter:	1	2	3	4	5
2) Preparation for Each Class	1	2	3	4	5
3) Communicated Material Effectively:	1	2	3	4	5
4) Responded Well to Student Questions:	1	2	3	4	5
5) Established Positive Rapport With Students:	1	2	3	4	5

Comments? (Please elaborate) _____

Additional Questions

What did you find was the most valuable part of this course?	<u>learned thru different scenarios</u>
Do you have any suggestions on how we could improve this program?	
Other comments?	
Name (Optional):	

May We Use Your Quotes/Comments? YES / NO If Yes, Signature: [Signature]

"No Excuses. Just Solutions."