Construction Industries Board
2401 NW 23rd St. Suite 2F
Oklahoma City, OK 73107
Telephone: (405) 521-6550
Toll Free: (877) 484-4424
Web Site: http://ok.gov/cib/

CONTINUING EDUCATION COMPLAINT FORM

Check the appropriate spaces for type of license and type of class.

☐ Electrical ☐ Mechanical ☐ Plumbing ☐ Inspector ☐ Roofing

☐ Seminar/Classroom ☐ On-Line ☐ Correspondence Course

Name of Course Provider/Instructor _____

Course Location _____ Course Date _____ Course ID _____

Please use the following scale to rate each of the statements on course content and instructor evaluation:

1 – Strongly Disagree
2 – Disagree
3 – Neither Agree nor Disagree
4 – Agree
5 – Strongly Agree

Course Content

_____ Was accurate
_____ Was relevant to my work
_____ Helped to develop my job skills
_____ Allowed enough time for the material presented
_____ Held in an atmosphere conducive to learning
_____ Course material thorough, high quality, readable

Instructor

_____ Displayed a full grasp of the subject presented
_____ Was adequately prepared and organized
_____ Dealt effectively with different points of view
_____ Ensured participants understood concepts
_____ Related concepts to on-the-job situations
_____ Effectively summarized concepts presented

Please describe your complaint in detail. Attach additional page(s) if necessary.

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

NAME _____
First Middle Last

MAILING ADDRESS _____

City _____ State _____ Zip _____

TELEPHONE _____ _____
Home Cellular

Do you wish to remain anonymous? ____ Yes ____ No Signature_____