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| **Short Course Evaluation Form** |

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In order to maintain our high standard of the courses/units, we would be grateful if you could complete this form. We take notes of your comments as they help us to continue to improve our services.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

Unit Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Level: \_\_\_\_\_\_\_\_\_\_\_\_\_

Venue (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please rate the following:

Poor Fair Good Excellent N/A

Tutor(s) □ □ □ □ □

Content □ □ □ □ □

1. How would you describe the level of the session?

□ Too Simple □ Just Right □ Too Complex

2. Did the session meet your needs/expectations?

□ Fully Met □ Partially Met □ Not Met

3. Would you recommend this session to a friend?

□ Yes □ No

4. Which skills have you learnt?

□ More confidence □ Skill enhancement □ Communication skills

□ Team Working □ Cultural Awareness □ Sharing skills

□ Motivation □ Feel better □ Progression to higher level

□ Better understanding of subject

□ Other (please state): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. What would you like to do next?

□ Another course/unit □ Further Training □ Work Placement

□ Volunteering □ Look for a job □ Join Advisory Board

□ Other (Please state)

6. Was the Venue suitable (if applicable)?

□ Fully suitable □ Partially suitable □ Not suitable □ Not applicable

7. Please use this space for any further comments.

Signed: ­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

***Thank you for your time.***

**Please submit with completed Assignments.**