

## Community Learning Feedback Form 2017/18

We would really appreciate if you could complete this feedback form. Your comments are really valued. They will be used to monitor the impact of the training being delivered to support you, ensure that everyone can access the training and that the training meets local community needs. It is also necessary to collect this information so we can provide evidence to our funders. Without this evidence we would not receive continued funding support from the Skills Funding Agency. Thank you.

If preferred you may complete this feedback form online. Please follow this link <http://tinyurl.com/n6ofcu8> to complete the form on your computer/device or visit the Richmond Community Learning website for a direct link.

<b>Course title</b>		<b>Course Start Date</b>	
<b>Tutors name</b>		<b>Venue</b>	
<b>Please print your name</b>			
<b>What was the reason/s for you attending the course? Please tick your answer(s) below:</b>			
<input type="checkbox"/> <i>To promote my well-being</i> <input type="checkbox"/> <i>To learn a new skill</i> <input type="checkbox"/> <i>Wanted to build on existing knowledge</i>		<input type="checkbox"/> <i>To support my children/s learning</i> <input type="checkbox"/> <i>Looking to gain skills to go to work</i> <input type="checkbox"/> <i>To gain skills for volunteering</i>	
<b>How would you describe your experience of this training? Please tick your answer(s)</b>			
<input type="checkbox"/> <i>It was inspiring</i> <input type="checkbox"/> <i>I did not learn anything new</i> <input type="checkbox"/> <i>It was enjoyable</i> <input type="checkbox"/> <i>The course was pitched at the right level for me</i> <input type="checkbox"/> <i>It was difficult</i> <input type="checkbox"/> <i>I could have used this time for other things</i> <input type="checkbox"/> <i>I am pleased I came</i>		<input type="checkbox"/> <i>The course was too advanced</i> <input type="checkbox"/> <i>It was boring</i> <input type="checkbox"/> <i>I found it difficult to keep up</i> <input type="checkbox"/> <i>The course was too long</i> <input type="checkbox"/> <i>The course was too short</i> <input type="checkbox"/> <i>I learnt a lot</i> <input type="checkbox"/> <i>the course was just right</i>	
<b>Were you employed at the start of the course?</b>	Yes / No	<b>Are you employed now?</b>	Yes / No
<b>Were the learning goals of the course/activity explained to you?</b>			Yes / No
<b>Do you feel that you have achieved the learning goals?</b>			Yes / No
<b>Overall were you satisfied with the course/activity?</b>	Very Satisfied <input type="checkbox"/>	Satisfied <input type="checkbox"/>	Not Satisfied <input type="checkbox"/>
<b>Would you recommend this course to a friend?</b>			Yes / No
<b>Did you complete the course?</b>	Yes / No	<b>Did you get a qualification?</b>	Yes / No
<b>If you did not complete the course why not? Please tick your answer below:</b>			
<input type="checkbox"/> <i>I moved to a new provider</i> <input type="checkbox"/> <i>I suffered an injury or illness</i> <input type="checkbox"/> <i>I had a change in my personal circumstances</i> <input type="checkbox"/> <i>I started work</i> <i>Other: please state</i>			
<b>What did you get out of attending the course/activity? Please tick your answer(s) below:</b>			
<input type="checkbox"/> <i>Improved my confidence and self-esteem</i> <input type="checkbox"/> <i>Enabled me to be more involved in the community</i> <input type="checkbox"/> <i>Gave me a new interest/hobby</i> <input type="checkbox"/> <i>Kept me active and involved</i> <input type="checkbox"/> <i>Helped me to make new friends</i> <input type="checkbox"/> <i>A qualification</i> <i>Other: please state</i>			

Have you learnt skills that you can use in the future?	Yes / No
Will these skills help you to find work?	Yes / No
Will these skills help you support your family?	Yes / No
Will these skills help you to start another course?	Yes / No
Will these skills help you to become a volunteer?	Yes / No
Have you started a job since you began this course?	Yes / No
Is there any other way that you will be using these skills? Please give details	
Now that you have finished the course/activity what are you going to do next? Please tick your answer(s)	
<input type="checkbox"/> Part time employment <input type="checkbox"/> Building on existing knowledge <input type="checkbox"/> Full time employment <input type="checkbox"/> Enjoying retirement <input type="checkbox"/> Entered further education <input type="checkbox"/> Providing family support <input type="checkbox"/> Entered higher education <input type="checkbox"/> Taking a break from learning	<input type="checkbox"/> Found voluntary work <input type="checkbox"/> Wanting to learn a new skill <input type="checkbox"/> Full time education or training <input type="checkbox"/> Continuing existing programme of learning <input type="checkbox"/> Self-employed <input type="checkbox"/> Looking for work part time <input type="checkbox"/> Looking for work full time Other: please state
If you are continuing on a different course will it lead to a qualification?	Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know <input type="checkbox"/>
If yes what is the qualification and who will be the provider?	
Did the tutor let you know about future learning opportunities?	Yes / No
Would you like more information on courses, activities, or careers guidance?	Yes / No
Please give areas of interest:	
Would you like information on other services such as housing or welfare benefits?	Yes / No
If yes please specify what services:	
<b>If you have requested any information, how would you like to be contacted (please provide your contact information)</b> <b>Email:</b> <b>Address:</b> <span style="float: right;"><b>Mobile Telephone:</b></span>	
What courses if any would you like to be made available locally in the Richmond borough?	

Please tick to confirm that the tutor has informed you about the Government's Prevent Duty Regulations and about British Values.  Please confirm that the tutor has provided you with an information leaflet about Prevent, British Values and Community Learning services.

Please give this completed feedback form to your tutor or send it directly to Community Learning, The Venue, Twickenham TW1 1BH. Alternatively you can scan and email it to: [community-learning@achievingforchildren.org.uk](mailto:community-learning@achievingforchildren.org.uk)

Thank you for attending a Community Learning activity. We hope that you have found this a positive, enjoyable learning experience. **If you were not satisfied with the course/activity or have any concerns please do contact Community Learning directly by email, post or by phone 0208 734 3385**

**Data Protection Act 1998 – The information you provide on this form will be passed to the Skills Funding Agency. The Skills Funding Agency is responsible for funding and planning education and training for young people and adults in England, and is registered under the Data Protection Act 1998. At no time will your personal information be passed to organisations for marketing or sales purposes.**