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| **Course Evaluation** | | | | | |
|  | | | | | |
| **Name:** | Click or tap here to enter text. | | | | |
| **Submission Date:** | Click or tap to enter a date. | | | | |
| **Course:** | **Growing Up In Care: Lived Experience** | | | | |
|  | | | | | |
| **What is your role/experience working with children in care?** | | | | | |
| **Answer :**  Click or tap here to enter text. | | | | | |
| * **How did you find out about Section 31 Training?** | | | | | |
| **Answer :**  Click or tap here to enter text. | | | | | |
| * **What was the most useful part of the training for you, and why?** | | | | | |
| **Answer :**  Click or tap here to enter text. | | | | | |
| * **What do you think you might do differently as a result of completing the course?** | | | | | |
| **Answer :**  Click or tap here to enter text. | | | | | |
| * **Do you feel you can relate the content to the children you look after/work with?** | | | | | |
| **Answer :**  Click or tap here to enter text. | | | | | |
| **How would you rate the quality of the content in this course?** | | | | | |
| **Excellent** | | **Very Good** | **Good** | **Satisfactory** | **Poor** |
| **The course was delivered in a way which was understandable** | | | | | |
| **Strongly Agree** | | **Agree** | **Neutral** | **Disagree** | **Strongly**   **Disagree** |
| **The content met/exceeded my expectations of the course** | | | | | |
| **Strongly Agree** | | **Agree** | **Neutral** | **Disagree** | **Strongly**   **Disagree** |
| **I feel this training will be helpful in my work** | | | | | |
| **Strongly Agree** | | **Agree** | **Neutral** | **Disagree** | **Strongly**   **Disagree** |
| **The trainer was knowledgeable in this training topic** | | | | | |
| **Strongly Agree** | | **Agree** | **Neutral** | **Disagree** | **Strongly**   **Disagree** |
| **The content was organised and easy to follow** | | | | | |
| **Strongly Agree** | | **Agree** | **Neutral** | **Disagree** | **Strongly**   **Disagree** |
| **I feel this course has improved my understanding of children in care** | | | | | |
| **Strongly Agree** | | **Agree** | **Neutral** | **Disagree** | **Strongly**   **Disagree** |
| **I would recommend this course to somebody else** | | | | | |
| **Strongly Agree** | | **Agree** | **Neutral** | **Disagree** | **Strongly**   **Disagree** |

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| * **What future courses, if any, would you like to see from Section 31 Training?** |
| **Answer :**  Click or tap here to enter text. |
| * **Please give any comments about the course that may have made the training more beneficial for you (please also use this box for any additional feedback you may have).** |
| **Answer :**  Click or tap here to enter text. |