LEARNER PRE-COURSE PREPARATION QUESTIONNAIRE

Name: _____
Address: _____
_____
_____
Contact No: _____
Course of Interest: _____

Please answer the following questions in response to the training you are interested in. The information you provide us with will help us to support you on the course so please answer questions as completely as possible. The information you provide will be issued to the course tutor to help them to ensure that the course meets your needs.

Describe why participating on this course is important to you.
Explain what your understanding is of the ways this course will be assessed - for example (role plays, written assignments etc)
What concerns do you have about doing this course?
How would you rate your feelings about doing this course? **(Please circle number most relevant to you)** **Anxious** **Comfortable** **1 2 3 4 5 6**

What is of most interest to you about this course?
How much knowledge do you feel you have in this area? **(Please circle number most relevant to you)** **None** **Extensive** **1 2 3 4 5 6**
Do you have any experience of caring? If so, please provide brief details.
Have you ever completed a FETAC Course or Care course previously. If so, please provide details.
Please list three things you would like to learn on this course. 1. 2. 3.
Do you have any queries for us in advance of starting this course? If so, please advise.
Where did you hear about this course?

Thank you for your time in completing this questionnaire. We look forward to welcoming you on our course.

Signed: _____ Date: _____