 SURF LIFE SAVING NEW SOUTH WALES

Participant Evaluation Form

Season: 2023/24
Date Revised: June 2023
Version No: 6.0

The results of this evaluation form will be used to improve the overall quality of our training. Your name is not required. Based on your experience of the delivery of this course, please provide a rating for each of the aspects stated.

GENERAL INFORMATION

Course Name		Course Start Date		Course Finish Date	
Location		RPL pathway	☐ Yes ☐ No		
Name of Trainer(s)					
Name of Assessor/Facilitator(s)					
Were any reasonable adjustments made?					

	Strongly Agree	Agree	Disagree	Strongly Disagree
Pre-course information				
Information provided before the course was clear and useful	☐	☐	☐	☐
The course covered what I expected	☐	☐	☐	☐
It was clear from the start what was expected of me	☐	☐	☐	☐
Accessing online resources was simple and easy to find, e.g., Participant Handbook, Learner Guide	☐	☐	☐	☐
Accessing the online learning via the eLearning platform was simple and easy to find	☐	☐	☐	☐
Course delivery				
The activities used and materials provided helped me to learn	☐	☐	☐	☐
The trainer was enthusiastic and made the course interesting	☐	☐	☐	☐
The trainer encouraged me to participate in all activities	☐	☐	☐	☐
Assessment				
I was ready for all assessment activities	☐	☐	☐	☐
Assessment activities were clearly explained	☐	☐	☐	☐
The Assessor provided me with constructive feedback	☐	☐	☐	☐
The assessment was a fair test of my knowledge and skills	☐	☐	☐	☐
Outcomes				
The course provided me with the knowledge and skills I needed	☐	☐	☐	☐
As a result of the course, I am now confident in my abilities in this area	☐	☐	☐	☐

General comments / feedback

Please include here any additional feedback / comments which could assist in improving our training: