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|  **Feedback Form** |
| **Name:** |  |
| **Role:**  |  |
| **Date completed:** |  |
| **Instructions**Please take the time to address each feedback item below by inserting a cross in the relevant category. Provide comments where applicable to help the presenter understand their strengths and weaknesses for self-improvement.  |
| **Feedback item**  | **Strongly Agree** | **Agree** | **Disagree** | **Strongly****Disagree**  | **Comments** |
| The learner’s LLN rating was based on validated tools and sources.  |  |  |  |  |  |
| The spikey profile provided insight into the learner’s performance levels.  |  |  |  |  |  |
| The assessment strategies were relevant. |  |  |  |  |  |
| The learning resources were customised to suit the learner. |  |  |  |  |  |
| The learning support strategies were relevant.  |  |  |  |  |  |
| The instructional strategies improved the learner’s LLN skills.  |  |  |  |  |  |
| Specialist advice was used. |  |  |  |  |  |
| There were gaps in the LLN approach. |  |  |  |  |  |
| Do you feel you improved your skills as a result of this training session?  |  |  |  |  |  |
| **Other comments:** |  |