

Learner Feedback Survey (Telephone)

Learner Na	me							
Programme	2							
Date of Cou	ırse							
Contact Tel	. No.							
WWW - Tell me about your course of study at AVCT? Please describe your experience of the course.								
EBI - How could we improve your learning experience?								
What are you doing now?								
What are yo	u future plar	s and what	is your progr	ession prefe	rence?			
A-Higher level course			E- <i>A</i>	E-Another training course				
B-Further Education course			F-E	F-Employment				
C-Higher Education (University) course				G-Voluntary				
D-Apprenticeship or Traineeship			H-	H-Become involved in my community				
Α	В	С	D	E	F	G	Н	



Is there anything we can do to support your future development?
How did you hear about the course at AVCT?
Is there anything else you would like to say?
is there anything else you would like to say:
Completed By
Date