

Please place **ONE** cross in the box next to the number which best describes how much you agree with each of the statements.

1 - Agree Completely; 2 - Agree Mostly; 3 - Disagree Mostly; 4 - Disagree Completely; 5 - Not Applicable (N/A)

		12	2	0	0		
					☺	☹	
					Agree Completely	Disagree Completely	N/A
Office Use Only	Satisfaction with the [Provider] (contd)						
(2)	9 The [Provider] provides me with sufficient feedback about my employee's progress	1	2	3	4	5	
(33)	10 I receive timely feedback about attendance	1	2	3	4	5	
(11)	11 I feel that my employee is learning new skills at [Provider]	1	2	3	4	5	
(43)	12 My employee has become more effective since beginning training	1	2	3	4	5	
(57)	13 My employee is developing confidence and self esteem	1	2	3	4	5	
(13)	14 I am satisfied with the progress that my employee is making at [Provider]	1	2	3	4	5	
(4)	15 The course/training meets the needs of my employee	1	2	3	4	5	
(3)	16 The course/training meets the needs of our organisation	1	2	3	4	5	
(9)	17 The Provider gives a value for money service	1	2	3	4	5	
(14)	18 I am satisfied with the service I receive from the [Provider]	1	2	3	4	5	

How we could work together:

(20)	19	Would you be prepared to help the [Provider] to improve its provision by joining an employer liaison group ?	Yes <input type="checkbox"/>	1	No <input type="checkbox"/>	2
(21)	20	Would you be prepared to allow a member of [Provider] staff to update their skills in your workplace (e.g. on work placement)?	Yes <input type="checkbox"/>	1	No <input type="checkbox"/>	2
(25)	21	Would you be prepared to host a visit of learners to your organisation?	Yes <input type="checkbox"/>	1	No <input type="checkbox"/>	2
(63)	22	Would you be prepared to give a presentation to the [Provider]'s learners about your business?	Yes <input type="checkbox"/>	1	No <input type="checkbox"/>	2
(49)	23	Would you be prepared to provide Work Placement opportunities for [Provider] learners?	Yes <input type="checkbox"/>	1	No <input type="checkbox"/>	2
(54)	24	Would you like to receive information about the free training and subsidised wages that could be available to you under the Government's "Train to Gain" scheme?	Yes <input type="checkbox"/>	1	No <input type="checkbox"/>	2
(70)	25	Would you like to receive information on your Sector Skills Council and how they can help your business?	Yes <input type="checkbox"/>	1	No <input type="checkbox"/>	2

(please continue over the page)

How we could work together: (contd)

(55) 26 Would you like to receive information about the apprenticeship programme? Yes ¹ No ²

(47) 27 Would you like to receive information on the range of courses offered by the [Provider]? Yes ¹ No ²

(29) 28 Do you expect your employees to undertake any further skills training in the next 2 years? Yes ¹ No ²

Please specify any further skills training if possible:

(48) 30 What are the best methods of providing you with information about training?
(Please place a cross in all that apply)

Printed prospectus ¹

Advertisements in the local newspaper ²

Website ³

Personal contact with a [Provider] representative ⁴

Direct mail ⁵

Direct email ⁶

Other ⁷

About your Organisation

(51) 31 How many staff do you employ? (Please place ONE cross in appropriate box)

1 - 10 ¹

11 - 20 ²

21 - 30 ³

31 - 40 ⁴

41 - 50 ⁵

51+ ⁶

(52) 32 Does your organisation have a training budget? Yes ¹ No ²

(53) 33 Does your organisation have an organisational needs analysis/training plan? Yes ¹ No ²

(please continue over the page)

About your Organisation (contd)

(64) 34 How would you describe your business? (Please place ONE cross in appropriate box)

Sole Trader 1Partnership 2Private Limited Company 3P.L.C 4Public Sector 5Charitable Organisation 6Other 7

If your business is 'Other', please specify

General Comments

Please comment if you wish about the Provider and the course/training.

Thank you for completing this survey