



Learners Evaluation Questionnaire

Visit:												
Date:												
Subjec	:t:											
Name.	••••						Or	rganisa	ation			
1	Lea	arning										
a) l	Relevance of subject											
Not relevan	nt	1	2	3	4	5	6	7	8	9	10	relevant
b) Amount of learning achieved												
Small		1	2	3	4	5	6	7	8	9	10	huge
c) Usefulness												
Not ver useful	У	1	2	3	4	5	6	7	8	9	10	useful
d)	Wh	at impa	act will	the lea	arning I	have o	n your	work				
Small impact		1	2	3	4	5	6	7	8	9	10	Huge impact

2 Methods

a) Structure of the learning...

Not well structured	1	2	3	4	5	6	5 7		8	9	10	Well structured
b) Methods used in the learning												
Not appropriate to need	2 3		4 5		6 7		8		9	10	Very appropriate to need	
c) Understandability of the learning												
Not understood well	1	2	3	4	5		6	7	8	9	10	Understood very well
d) Enjoyable												
Not enjoyable	1	2	3	4	5	6	7	8		9	10	Very enjoyable
3 Practicalities												
		Very										Very good
Venue		1		2	3	4	5	6	7	8	9	10
Travel accessibility	,	1		2	3	4	5	6	7	8	9	10
Administration	on	1		2	3	4	5	6	7	8	9	10
Translation		1		2	3	4	5	6	7	8	9	10
Accommoda	tion	1		2	3	4	5	6	7	8	9	10
Food		1		2	3	4	5	6	7	8	9	10
4 Any other comments												
1												

