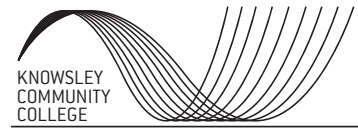


EMPLOYER SERVICES

Apprenticeship Employer Interim Evaluation



Name of Learner:

Name of Supervisor:

Company Name:

Company Address:

Course: Week No: 12 36 72 96

Pre-event Organisation

Strongly disagree *Disagree* *Agree* *Strongly agree*

Pre-event arrangements were satisfactory (initial contact/H&S visit/information advice & guidance)

Your involvement in the design of the training met your needs (programme, individual learning plan ILP)

General communication with KCC was good

Skills and Knowledge Acquired

Your staff are acquiring new skills/knowledge

Your staff will use these new skills/knowledge in their workplace

Would you be prepared to use KCC for future training?

Would you recommend KCC to other organisations?

Please answer on the following scale

| Complaint | | | Dissatisfied | | | OK | | Recommend | |
|-----------|---|---|--------------|---|---|----|---|-----------|----|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| | | | | | | | | | |

MULTIPLE LEARNERS WITH THE SAME SUPERVISOR IN ONE ORGANISATION - PLEASE COMPLETE ONE INTERIM REVIEW AND LIST ALL NAMES OF LEARNERS.

Signed: Date: