



Pre-training Questionnaire

Q1. Please write down the name of the training course you are going on, or the structured learning you are about to do.

Q2. Why are you attending this course/undertaking this learning?

- | | |
|--|--|
| <input type="checkbox"/> My supervisor recommended that I do | <input type="checkbox"/> It is a requirement of my job |
| <input type="checkbox"/> I requested to | <input type="checkbox"/> It is a requirement for my department |
| <input type="checkbox"/> Other <input type="text"/> | |

Q3. What is your most important aim in doing this course/structured learning?

Q4. What do you hope to achieve from this training course/structured learning?

Q5. How do you feel about this training course/structured learning?

- | | |
|--|-------------------------------------|
| <input type="checkbox"/> Enthusiastic | <input type="checkbox"/> Resigned |
| <input type="checkbox"/> Fairly positive | <input type="checkbox"/> Frustrated |
| <input type="checkbox"/> Neutral | |

Q6. What do you think your supervisor would like you to achieve from this training course?

Thank you for taking the time to complete this questionnaire.