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| Learner Feedback Form |

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| 1 | Was a learning agreement completed with you? | | | | | | Yes/No | | |
| 2 | Did you have an opportunity to review the learning agreement during the placement. | | | | | | Yes/No | | |
| 3 | Do you feel the learning opportunity met your learning needs?  If “No”, please give further details. | | | | | | Yes/No | | |
| 4 | How well do you think the practice educator / assessor provided the following? | | | | | |  | | |
| Teaching | | Poor | 1 | 2 | 3 | 4 | |  | Excellent | |
| Support | | Poor | 1 | 2 | 3 | 4 | |  | Excellent | |
| Supervision | | Poor | 1 | 2 | 3 | 4 | |  | Excellent | |
| Provision of relevant learning opportunities | | Poor | 1 | 2 | 3 | 4 | |  | Excellent | |
| Management of your learning over time | | Poor | 1 | 2 | 3 | 4 | |  | Excellent | |
| Providing information | | Poor | 1 | 2 | 3 | 4 | |  | Excellent | |
| Feedback on progress | | Poor | 1 | 2 | 3 | 4 | |  | Excellent | |
| Assessment of your professional capability | | Poor | 1 | 2 | 3 | 4 | |  | Excellent | |

Any other comments about the practice educator/ assessor /supervisor?

Signed Date