

Agent Feedback

You may use this form to provide feedback about your agent.

You may give positive or negative feedback. It is very important to us that your experience with our agents has the best possible outcomes for you.

Your answers will be treated as confidential.

You may provide your name if you wish, or you may choose to remain anonymous.

The Agent

Company name
Agent representative name
Location

Information

Did the agent give you ENOUGH information about your course and/ or our school?	<input type="checkbox"/> Yes, I was given enough information <input type="checkbox"/> No, I needed more information (please give details)
Did the agent give you ACCURATE information about your course and/ or our school?	<input type="checkbox"/> Yes, the information was accurate <input type="checkbox"/> No, the information was not 100% accurate (please give details)
Were you promised or guaranteed anything as an incentive for enrolling with us?	<input type="checkbox"/> No <input type="checkbox"/> Yes (please give details)
How would you rate this agent?	<input type="checkbox"/> Excellent <input type="checkbox"/> Above average <input type="checkbox"/> OK <input type="checkbox"/> Below average <input type="checkbox"/> Poor

Would you recommend this agent to your family or friends?	<input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, maybe <input type="checkbox"/> I don't know <input type="checkbox"/> Maybe not <input type="checkbox"/> Definitely not
Do you have any further feedback or comments?	

Your details

This section is OPTIONAL. You may choose to remain anonymous.

First name and last name	
DOB	
Your course	
Your email address	
Do you want SIA to contact you about your responses?	<input type="checkbox"/> Yes <input type="checkbox"/> No

OFFICE USE ONLY

		SIA staff / signed	Date
Received			
Entered	YES NO		
Notes			