

## Course progress feedback

You have been studying with us for some time, so we think it would be good to ask you for your opinion of how we are doing so that we can improve the study experience for our other students.

In this survey, we ask you a few questions about your course at Skills Institute Australia (SIA).

This is an **anonymous** survey. You do not have to provide your name or contact details if you do not wish to do so. It will only take about five minutes.

We appreciate you taking this time to answer these questions about your learning experience. Thank you for your help!

| About your course  |                  |
|--|------------------|
| What course are you studying?  |                  |
| What is your location?   | Brisbane   Perth |
| About your learning experience   |                  |
| Do you think your teachers are professional and knowledgeable about the course material? | Yes   No   Maybe |
| Do you think you receive enough training before you are assessed?                        | Yes   No   Maybe |
| Do you have access to good quality learning resources and facilities?                    | Yes   No   Maybe |
| Do you think the assessment items are fair and clearly explained?                        | Yes   No   Maybe |
| Do you get enough feedback on your assessment?   | Yes   No   Maybe |
| Is there any way we can improve the teaching and assessment experience?                  |                  |
|  |                  |
| About your learning experience   |                  |
| Do you know what you need to do to successfully complete your course?                    | Yes   No   Maybe |



| Do you expect to complete your course at the planned time?   | Yes   No   Maybe               |  |
|--|--------------------------------|--|
| Do you expect that your course will help you in the future?  | Yes   No   Maybe               |  |
| Do you have any comments about your expected outcome?  |                                |  |
|  |                                |  |
|  |                                |  |
| Finally  |                                |  |
| •  |                                |  |
| Do you have any other comments or feedback you wish to give us, positive or negative?  |                                |  |
|  |                                |  |
|  |                                |  |
|  |                                |  |
| Would you recommend Skills Institute Australia to your family and friends?   | Yes, definitely!               |  |
|  | Maybe                          |  |
|  | No (please give reasons above) |  |
| This is an anonymous survey, but you may wish to provide your name if you would like us to contact you about your responses. If you would like us to contact you, please provide your name and contact details here: |                                |  |
|  |                                |  |
| That's all!  |                                |  |
| Thank you for completing this survey!  |                                |  |
| We take student responses seriously and will use them to continue improving this school.   |                                |  |
| Have a great day!  |                                |  |
|  |                                |  |