**London Councils ESF 2014-20 Programme**

**Participant Leaver Form**

|  |
| --- |
| **Project details** |
| Provider name |  |
| Project name  |  |
| Project ID |  |

1. **What do you think of the trainer or advisor you have been working with?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Very good | Good | Not good or bad | Bad | Very bad |
| Knowledge of the subject or activity |  |  |  |  |  |
| Understanding of your needs |  |  |  |  |  |
| Support in setting targets to help you achieve your goals |  |  |  |  |  |
| Help with finding other support for you |  |  |  |  |  |
| Support with helping you to plan your next steps |  |  |  |  |  |

1. **How has this activity made a difference to you?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Improved a lot | Improved a little | Not changed | Got worse | Got much worse |
| My confidence has… |  |  |  |  |  |
| My skills have… |  |  |  |  |  |
| My prospects of getting a job have… |  |  |  |  |  |
| My knowledge of the options available to me has… |  |  |  |  |  |
| My motivation to make the next steps has… |  |  |  |  |  |
| My ability to manage my time and responsibilities has… |  |  |  |  |  |

1. **Overall how satisfied or dissatisfied were you with the activity?**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Very satisfied | Satisfied | Neither satisfied or dissatisfied | Dissatisfied | Very dissatisfied |
|  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **Participant Name** |  | **Signature (Optional)** |
| **Participant ID** |  |
| **Date left programme** |  |