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TRAINER FEEDBACK FORM FOR USE IN ALL COSCA VALIDATED COURSE

Please \checkmark the appropriate box:

COSCA Counselling Skills Certificate Course

Other Counselling Skills Certificate Course

Specialist Course

COSCA Counselling Supervision Course

Other Counselling Supervision Course

Diploma Course

Name of Course for which this TRAINER FEEDBACK FORM is being completed:

Name of Validated Organisation Providing the Training:

Name and Contact Details of Trainer:

Date of Completing:

- COSCA, the professional body for counselling and psychotherapy in Scotland, is continually working towards excellence in its work of validating counselling skills and counselling courses.
- To this end, we would be grateful if you answered the questions below on the course(s) you have just delivered.
- Your comments on different aspects of the course, together with feedback from students and the validated organisation, will be used as part of COSCA's annual monitoring of its validated courses. Please circle a number to indicate the level of your agreement/disagreement with the statements below and give your answers to the questions asked. If you need more room, please continue your comments on a separate sheet.

1.	Course Aims and Intended Learning Outcomes							
	The aims and intended learning outcomes of the course were clearly stated in advance.							
	Agree 1	2	3	4	Disagree 5			

2.	Structure and	I Content of the	Course					
	The course structure and content were consistently relevant to the learning outcomes.							
	Agree 1	2	3	4	Disagree 5			
	Please specify	the elements of	the above that v	were not co	nsistently relevant.			

3.	Teaching and	Learning						
	The course used learning and teaching approaches that are generally suited to its aims and learning outcomes.							
	Agree 1	2	3	4	Disagree 5			

3.1 The course made meaningful use of videotaping.							
Agree 1	2	3	4	Disagree 5			

3.2 The course was supported by well-prepared and relevant course materials.								
Agree			Disagree					
1	2	3	4	5				

3.3 Please specify any parts of the course that you think need to be up-dated.

3.4 What changes or improvements could be made?

4. Learning Resources

The course was supported by suitable:

		Agre 1	e 2	Disag 3	5	
•	ICT equipment including video cameras					
•	Library resources to support course					
•	Equipment (non-ICT)					
•	Accommodation					

4.1	How could the	course be	better	supported?
1 . I		course be	Dellei	Supporteu:

5. Course Assessment Process

Students were given sufficient time for returning written assessments.

Agree				Disagree	
1	2	3	4	5	

5.1 Trainer feedback to students reinforced their understanding of the course.

Agree 1				Disagree	
1	2	3	4	5	

5.2 Please suggest ways in which you think the course assessment process can be improved.

6.	Student Support (Please complete where application of the second se	able)					
	Effective arrangements were made for:		Agre	Agree			
	Disagree	1	2	3	4	5	
	Provision and supervision of practice placement	S					
	academic guidance						
	pastoral support						
	• the needs of people with a disability						
	• giving students full and clear information						
	 giving students full and clear information Please suggest how you think student support could be improved. 						

7. Trainer Support

In your role as trainer you received sufficient support from:

- COSCA (Counselling and Psychotherapy in Scotland)
- The course provider
- Co-trainers

Please suggest how you think trainer support could be improved.

8. Tracking of Students

Please state the number of students on the course you have just taught who have stated an intention to:

Number of Students

- work as an independent practitioner
- work as a volunteer counsellor
- work in the voluntary sector as a paid counsellor
- work in the statutory sector e.g. NHS primary care setting
- not to work as a counsellor

9.	COSCA's Annu	al Trainers Evo	ent					
	COSCA's Annual Trainers Event is a worthwhile experience.							
	Agree 1	2	3	4	Disagree 5			
	Please suggest	ways in which tl	nis event can b	e improved	d to meet your needs.			

10. Comments on Any Other Aspect of the Course

Please suggest any changes or improvements that you think should be made to the course.

Thank you for completing this form. Please return it to the above address or by email.