This important survey will provide information that should be of use to your organisation when making decisions about your future choice of training providers.

The survey should take no more than 5 minutes to complete and is being carried out by GfK NOP, a completely independent market research company.

Complete the survey now by:

**Freephone:** 0800 856 0855

**Internet:** http://www.surveys.com/employerviews

**Freepost:** Complete and return the paper survey

When prompted, enter the following PIN number used to identify your provider, named above, to ensure confidentiality and to prevent fraud.

**PIN number:**

Don't lose your opportunity to feedback on your training. This is an important survey which will provide information that should be useful to your organisation in the future.

If you are unable to access the survey, call the GfK NOP Helpline, 020 7890 9009, or email: employerviews@gfk.com
Framework for Excellence - Employers' Views of Training

Thank you for taking the time to answer these questions. Please answer the questions below in relation to the training provider named opposite. Your answers will be completely confidential unless you wish to share them with your training provider. Please mark your answers with an ‘X’, in black ink, and return this form as soon as possible.

SECTION 1: Background Information about your Organisation

Q1 Between August 2008 and July 2009, approximately how many of your staff received any training or assessment from this training provider?

PLEASE TICK ONE BOX ONLY

☐ 1
☐ 2 - 4
☐ 5 - 9
☐ 10 - 19
☐ 20 - 29
☐ 30 or more
☐ Don't know

Q2 As the employer, did you have to pay for any of this training?

PLEASE TICK ONE BOX ONLY

☐ Yes, in all cases
☐ Yes, in some cases
☐ No

SECTION 2: Rating the Training Received

In this section you are asked to rate the overall quality of the training delivered by this training provider between the period August 2008 and July 2009.

Q3 How do you rate their overall performance in each of these aspects on a scale of 1-10, where 1 = very poor and 10 = excellent?

PLEASE TICK ONE BOX FOR EACH STATEMENT

a) Understanding your organisation’s training needs..............................................................

b) Offering training and/or assessment in a flexible way to meet your needs.........................

c) Communicating clearly with you throughout the process................................................

d) Their overall efficiency in their dealings with you............................................................

e) The professionalism of the staff delivering training and/or assessment............................

f) Delivering training that reflects up-to-date practices in your industry/sector......................

SECTION 3: Overall Satisfaction

Q4 How would you rate the benefits of the training to your organisation, on a scale of 1-10, where 1 = no benefits and 10 = very significant benefits?

PLEASE TICK ONE BOX ONLY

☐ No benefits
☐ 1
☐ 2
☐ 3
☐ 4
☐ 5
☐ 6
☐ 7
☐ 8
☐ 9
☐ 10
☐ Don't know/too early to tell

Q5 How satisfied or dissatisfied were you with the overall quality of the training on a scale of 1-10, where 1 = extremely dissatisfied and 10 = extremely satisfied?

PLEASE TICK ONE BOX ONLY

☐ Extremely dissatisfied
☐ 1
☐ 2
☐ 3
☐ 4
☐ 5
☐ 6
☐ 7
☐ 8
☐ 9
☐ 10
☐ Extremely satisfied
☐ Don't know

Q6 How likely would you be to recommend this training provider to another employer seeking similar training, on a scale of 1-10, where 1 = highly unlikely and 10 = highly likely?

PLEASE TICK ONE BOX ONLY

☐ Highly unlikely
☐ 1
☐ 2
☐ 3
☐ 4
☐ 5
☐ 6
☐ 7
☐ 8
☐ 9
☐ 10
☐ Highly likely
☐ Don't know

SECTION 4: Final Comments

If you have any suggestions to help improve the services offered to employers by this training provider, please record these in the box below. Please note that we will not be able to pass your suggestions on unless you have ticked the permission box below.

Please TICK this box if you consent to having your responses shared with the training provider (and the lead provider if they are part of a consortium) to assist their quality assurance processes. If you do not tick the box your responses will still be used to generate a satisfaction score for the named provider. Please be assured that we will, insofar as we are able due to statutory (for example, but not limited to, the Freedom of Information Act 2000) or other restrictions or obligations, endeavour to keep everything you tell us on this questionnaire confidential.

Please TICK this box if you consent to the training provider contacting you to discuss your responses.

THANK YOU FOR YOUR TIME

Please use the envelope provided to return the questionnaire to us.

If this has become detached, please send it to: Framework for Excellence, Employer Views Survey, FREEPOST KE4466, GfK NOP, Caxton House, 91 Victoria Road, Chelmsford, CM1 1ZZ.