

## **ACCSA COURSE EVALUATION**

Lecturer Name	Candidate Name
Course	Location
Course	Location
DID YOU FIND THE COURSE CONTENT SUIT	ED YOUR NEEDS
WAS THE COURSE CONTENT DELIVERED IN	AN UNDERSTANDABLE MANNER
DID YOU FIND THE LECTURER CAPABLE AN	D KNOWLEDGABLE
ARE YOU SATISFIED WITH THE QUALITY OF	THE COURSE OVERALL (IF NOT WHY?)
WOULD YOU CONTINUE TO USE ACCSA AS	YOUR CHOSEN EDUCATION PROVIDER
WOULD YOU RECOMMEND ACCSA TO OTHE	RS
ADDITIONAL NOTES	
CANDIDATE SIGNATURE	DATE