

This plan provides you with details of what you will cover during the course and assesses how your knowledge has developed .

Skills
Funding
Agency

Learner Name:

Course Title:

Tutor Name: Provider:

What can I learn on the course?

At the **start** of the course for each of the learning outcomes or personal goals, please put the letter "S" in the box that best fits your present level of knowledge and understanding. At the **end** of the course for each of the learning outcomes please put the letter "E" in the box that best fits your level of knowledge and understanding.

Learning outcomes /Personal goals	I know nothing about this	I know a little about this	I know about this but would like to know more	I know and understand this
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

Please give details of any special help or support you will need to take part in the course.

How has this course helped you?

Learner Signature Date

Tutor Signature Date