

Student Course Induction Checklist

Course _____ Trainer _____ V:1st May 2009

Issue	Y/N
<input type="checkbox"/> We discussed the course outline and I am clear on:	-
1. The outcomes I need to achieve to complete each unit	
2. The way the course is structured in terms of classroom time, simulations, assignments, research work, reading and the kind of assessments I will need to complete.	
3. Where self study, assignments or any other “out of class” activities required - I am aware of the time I need to invest to complete each element of each unit of the program.	
4. I am clear on the course requirements and feel my background is appropriate to the background of students entering the course	
<input type="checkbox"/> I understand the language, literacy or numeracy issues that may impact my ability to complete the course and have discussed any concerns I have with the trainer.	
<input type="checkbox"/> I am clear on the location(s) and timing of meetings associated with elements of the course where the course is run over more than 1 day	
<input type="checkbox"/> I am clear on the ongoing support available from my Trainer and the Allens Training organisation and know how I can make contact with them	
<input type="checkbox"/> I am clear on the way and when I will receive feedback regarding assessments, assignments and evidence that I have completed the course.	
<input type="checkbox"/> I understand the way “recognition of prior learning” works and how to apply for assessment on this basis where applicable.	
<input type="checkbox"/> I understand the Complaint system Allens Training has in place and how I can register a complaint.	
<input type="checkbox"/> I know how to access Allens Training website and how to view their policies (including Privacy) on the web.	
<input type="checkbox"/> I understand the fees and charges associated with the course and the circumstances under which a refund may be granted.	

Student Comments:

Student Name(print)_____

Student Signature _____ Date ___ / ___ / ___

Trainers signature _____ Date ___ / ___ / ___