

Peer Assessment Tool For Structured Education Programme

A copy of this form should be placed in your Quality Development File

Name of educator

Name of assessor

Date of Course

How many in group?

Male/ female ratio

Range of ages in group?

1. What do you think went well?

2. What do you think could be improved?

PTO

3. Suggestions for next/future course for educator

4. Suggestions /themes for team meeting changes