

Evaluation form

How well did I do? Review your targets and your plan and reflect on where you go from here.

Name

Centre

Progress			
Did you achieve Target 1? (Please tick)	Yes	No	Partially (explain)
Did you achieve Target 2? (Please tick)	Yes	No	Partially (explain)
Plan			
Identify any strengths in your plan (things that went well)			
Identify any weaknesses in your plan (things that could have gone better)			
How effective was your plan?			
Areas for further development			
Things I could improve on are			