

Post Office Training Feedback Form (Post go live survey)



Post Office Training Feedback Form

The survey will take approximately 10 to 15 minutes to complete.

Now that you have been operating your branch for a couple of months we would like you to reflect honestly on the training you received and whether it prepared you for the day to day running of your branch.

We need you to answer all questions that are marked with a red asterisk whilst the other questions are purely optional.

If you have any queries about this survey please e-mail TrainingSurveys@GRO

Key Information

This section is optional. Please leave blank if you wish you complete the survey anonymously.

1. Your Name (Optional)

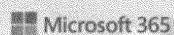
2. Branch Code (Optional)

3. Branch Name (Optional)

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**Post Office Training Feedback Form**

* Required

Online Learning

Post Office Online Learning is the first stage of the New Postmaster Training. It is intended to give you a good grounding in Post Office products, services and compliance before your classroom training course.

4. I feel that the online learning I completed provided me with a good base knowledge for the classroom training *

☐ Strongly agree

☐ Agree

☐ Disagree

☐ Strongly disagree

☐ Not applicable - I did not undertake online learning

5. Are there any improvements/changes to the online learning that you think would have prepared you better for the classroom course? (Optional)

Enter your answer

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Classroom Training

Post Office classroom training is designed to build on the online learning and prepare you to open your Post Office with further support from an Onsite Trainer and Business Support Manager

6. Which month did you attend the classroom training? (Optional)

Select your answer : 

7. Classroom Location (Optional)

Select your answer : 

8. The classroom training was delivered in a professional manner *

☐ Strongly agree

☐ Agree

☐ Disagree

☐ Strongly disagree

☐ Not applicable - I did not attend classroom

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9. I feel that the classroom training I received prepared me with a good grounding before the onsite training in my branch. *

- ☐ Strongly agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly disagree
- ☐ Not applicable - I did not attend classroom

10. What improvements/changes to the classroom course do you believe would have ensured you were better prepared? (Optional)

Enter your answer

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Onsite Training

The onsite training is the final step in New Postmaster Training, designed to ensure you are prepared to run your Post Office

11. The onsite training was delivered in a professional manner *

☐ Strongly agree

☐ Agree

☐ Disagree

☐ Strongly disagree

☐ Not applicable - I did not receive onsite training

12. I feel that the onsite training I received prepared me with a good grounding in readiness to operate my branch *

☐ Strongly agree

☐ Agree

☐ Disagree

☐ Strongly disagree

☐ Not applicable - I did not receive onsite training

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13. Are there any improvements/changes to the onsite learning that you think would have prepared you better for running your branch? (Optional)

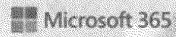
Enter your answer

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Overall New Postmaster Training

This section gives you the opportunity to provide feedback on New Postmaster Training as a whole

14. I feel that overall the New Postmaster Training prepared me to open and operate in my branch. *

☐ Strongly agree

☐ Agree

☐ Disagree

☐ Strongly disagree

☐ Not applicable - I received no training

15. Please add any final comments you have about the New Postmaster Training as a whole (Optional)

Enter your answer

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Specific Areas of Training

16. Following completion of your New Postmaster Training how strongly do you agree that you were confident in the following areas *

	Strongly Agree	Agree	Neither Agree Nor Disagree	Disagree	Strongly disagree
Finding your way around Horizon	☐	☐	☐	☐	☐
Completing basic transactions	☐	☐	☐	☐	☐
Daily cash management	☐	☐	☐	☐	☐
Weekly/ Monthly Balancing	☐	☐	☐	☐	☐
Customer Experience	☐	☐	☐	☐	☐
Product knowledge	☐	☐	☐	☐	☐

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Consent to Contact

We may want to contact you to get further clarification on your feedback or further feedback on your learning experience. This section is completely optional, but allows you to indicate if you are happy for us to contact you and to leave a preferred contact method. You will only be contacted if you give your consent in the question below.

17. Please indicate if you are happy for us to contact you about your New Postmaster Training experience

☐ Yes I am happy to be contacted

☐ No I do not wish to be contacted

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Submit

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