

CANDIDATE QUESTIONNAIRE

The purpose of this questionnaire is gain an understanding of how suitable and effective the current methods of evaluating students are, from the perspective of the candidates. We would be grateful if all candidates and teachers who went through the sponsorship process fill out and return this form. The findings will be used to further improve and develop the sponsorship process. Your frank opinions are vitally important to this process. Your comments will be treated in strictest confidence. Thank you for your cooperation. (Please fill in what you are able to even if you are unable to complete the whole questionnaire. Please use separate sheet for full responses where necessary.)

**THE SPONSORSHIP PROCESS**

1. How did you find/locate your Sponsors:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | At ATI AGM | Approached Sponsor Privately | Sponsor Brought into Your Training | Through ATI Office | Other, please specify |
| First Sponsor |  |  |  |  |  |
| Second Sponsor |  |  |  |  |  |
| Third Sponsor |  |  |  |  |  |

1. Were your sponsors helpful and approachable? YES NO Please comment:
2. Please mark in columns below of all of the procedures used during the sponsorship process:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Exchange Lessons | You gave lesson to Sponsor | Sponsor observed you giving lesson to | Sponsor watched video of you teaching | Evaluation of written material | Discussed aspects of Alexander Technique Principles |
| Private | Group |
| First sponsor |  |  |  |  |  |  |
| Second Sponsor |  |  |  |  |  |  |
| Third Sponsor |  |  |  |  |  |  |

Please specify any other method utilized that is not included above:

4. a) If there was a written component to your sponsorship process, which of the following was used (mark any relevant boxes.)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Open Ended Questions | Multiple Choice Questions | Essay | Oral Test | Submit Previously Written Work | Portfolio Project | Learning Journal/Log Book |
|  |  |  |  |  |  |  |

Please state any other that is not listed above:

b) Please describe the nature of any written part of your assessment, if applicable. Specify what worked well and what did not work as well for you.

c.) If there was no written component to your assessment, do you think that it would be

helpful to have one? YES NO

If yes please specify which you would prefer:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Open Ended Questions | Multiple Choice Questions | Essay | Oral Test | Submit Previously Written Work | Portfolio Project | Learning Journal/Log Book |
|  |  |  |  |  |  |  |

Please state any other that is not listed above:

1. a) Was the process in keeping with the Principles and Philosophy of the Alexander Technique?

Please indicate on the scale, 5 being ‘Yes thoroughly,’ 1 being ‘Absolutely not.’

5 4 3 2 1

Any other comments:

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b) Did you find the process… (Please mark relevant boxes)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Professionally Conducted | Sensitive to your training process | In Assessment | Confusing | Enjoyable | Not Enjoyable |
| Fair | Unfair | Difficult | Too Easy |
| First Sponsor |  |  |  |  |  |  |  |  |  |
| Second Sponsor |  |  |  |  |  |  |  |  |  |
| Third Sponsor |  |  |  |  |  |  |  |  |  |

Any other comments:

1. Was the time allowed adequate for your needs? YES NO If NO, please elaborate.
2. Was the environment inviting and was it conducive to an atmosphere of shared learning? YES NO Please comment further if you wish.

GENERAL

1. Do you have any further suggestions about how the evaluation process could be improved? Please specify.
2. In your own words, please let us know about your overall experience.

Your time and effort in filling out this form are greatly appreciated Thank you,

The Certification Coordinating Committee

The information below is optional if you prefer to remain anonymous Name:

Country: Date:

Please mail to:

**Alexander Technique International**

**PO Box 30588**

**Indianapolis, IN 46230 USA**

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