

FOLLOW-UP QUESTIONNAIRE

The questionnaire we are asking you to fill in (in three to six months after the end of the career counselling path you took part in) aims to highlight the activity's relevant outcomes from a personal and professional point of view.

Each question is followed by instructions for the correct completion of the questionnaire, the total duration of which should not exceed 10 minutes.

In accordance with the confidentiality of the contents, the answers will be treated anonymously.

Thank you for your cooperation.



NAME AND SURNAME

CURRENT WORK STATUS

THE COUNSELLING COURSE

1. When did you finish the course?

2. How likely are you to follow the course again? (1=very unlikely, 5=very likely)

1 2 3 4 5	
Notes	

3. Did you have the opportunity to talk with about what you achieved during the course?



4. If yes, with who? (caregiver/friend/family member, etc.)

5. Have you recommended the course to other people?

Yes No

6. For what reason?



care 4 carers FOLLOW-UP QUESTIONNAIRE

AREAS OF CHANGE

Please rank your 3 main expectations before starting the course by numbers in the circles (1=highest priority)

\bigcirc	ENHANCING MY SKILLS					
\bigcirc	LEARNING MORE ABOUT THE EXTERNAL CONTEXT					
\bigcirc	GAINING MORE KNOWLEDGE OF AVAILABLE OPPORTUNITIES					
\bigcirc	RESOLVING A MOMENT OF PERSONAL AND PROFESSIONAL CRISIS					
FIND	FINDING A JOB					
\bigcirc	CHANGING MY JOB					
\bigcirc	FINDING A SUITABLE TRAINING PATH					
\bigcirc	CHANGING THE WAY I SEE WORK					
GAINING MORE CONFIDENCE						
\bigcirc	IMPROVING MY TIME MANAGEMENT					
\bigcirc	OTHER					

At the end of the course to what extent have your initial expectations been met? (1 = not at all; 5 = completely)

Priority 1	1 2 3 4 5	Notes
Priority 2	12345	Notes
Priority 3	12345	Notes



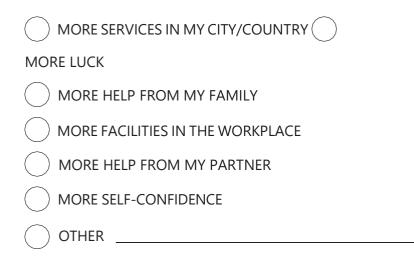
What do you think has changed most in your personal and professional life since following the course? (mark a maximum of 2 answers by ticking them with an X)

MY SELF-IMAGE
MY KNOWLEDGE OF OPPORTUNITIES IN THE EXTERNAL ENVIRONMENT
MY AWARENESS OF MY COMPETENCES
MY ABILITY TO MANAGE TIME
MY ABILITY TO DEAL WITH EVERYDAY PROBLEMS
MY IDEA OF WORK
MY SCALE OF PRIORITIES
MY IMAGE OF THE CAREGIVER IN THE WORLD OF WORK
SELF-CONFIDENCE
OTHER

How successful have you been so far in putting your action plan into practice? (1 = not at all; 5= completely)

$1 \ 2 \ 3 \ 4 \ 5$	
Notes	

If there is still little you have been able to do, what is the most you need to do to put your action plan into practice? (choose a maximum of two answers)





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PROFESSIONAL SITUATION

Did you find a job after following our course?



Does this job meet your expectations? (1 = not at all; 5 = completely)



Notes

Does this job meet your expectations? (1 = At all; 10= completely)



Imagine you can make whatever changes you want in your job. What would you change?

Would you like to be in the same job in two years from now? Why yes? Why no?

Does this job give you motivation?

Does this job cover your financial needs?

