



## Participant Answer Sheet

Please use the grid below to record your answer/s for each question as it is presented.

Name: .....

Organisation: .....

Date: .....

Question	Options	A	B	C	D	E	Score
Question 1: Session 1	Tick <b>three</b> boxes						...../3
Question 2: Session 1	Write the correct order (eg, ABCD)						...../1
Question 3: Session 2	Tick two boxes						...../2
Question 4: Session 2	Tick <b>one</b> box						...../1
Question 5: Session 2	Tick <b>three</b> boxes						...../3
Question 6: Session 3	Tick <b>one</b> box						...../1
Question 7: Session 3	Tick <b>one</b> box						...../1
Question 8: Session 3	Tick <b>one</b> box						...../1
Question 9: Session 3	Tick <b>one</b> box						...../1
Question 10: Session 4	Tick <b>one</b> box						...../1
Question 11: Session 4	Tick <b>one</b> box						...../1
Question 12: Session 4	Tick <b>one</b> box						...../1
Question 13: Session 4	Tick <b>three</b> boxes						...../3
<b>Total</b>							<b>...../20</b>