

**Employment Relations Education
APPROVED ERE COURSE DELIVERY
EVALUATION DETAILS REPORTING
FORM**

Department of Labour
TE TARI MAHI



Name of Organisation: _____

Name of Course: _____

For which year are you reporting? _____

For which period are you reporting? (Please tick one)

01/01 – 31/03	
01/04 - 30/06	
01/07 – 30/09	
01/10 – 31/12	

Location Main centres	Total No . of times run at this location.	Total No . of participants reached at this location.
Auckland City		
Hamilton City		
Rotorua/Taupo		
Wellington City		
Nelson City		
Christchurch City		
Dunedin City		
Other Regions eg: Waikato etc.		
TOTALS		

Gender*	
Men	
Women	
Did Not Respond	

Ethnicity*	
NZ Maori	
Pacific Islands	
NZ European/Pakeha	
Chinese	
Indian	
Other	
Did not Respond	

Please also provide a summary of the course evaluations that feature qualitative data and include a random sample of the responses made by participants.

We ask that you request information on ethnicity as required in the "Guidelines for Course Approval", however you must make it clear to participants that the information is for statistical purposes only, while also acknowledging that they may choose not to provide it.

* Also provide number who chose not to provide this information