

CENTRE:



COUNTY COUNCIL

Cumbria Adult Education Service

Enquiry Form

Date:

Name:

Address:

.....

Contact Details: Tel.email

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|------------------|---------------------|
| Enquiry Details: | Previous experience |
|------------------|---------------------|

Action (eg leaflet sent / signposted to other provision):

Where did you hear about us?

- Existing Learner
- County Brochure
- Centre Brochure
- Word of Mouth
- Website
- Advertisement
- Other (please specify).....

We would like to keep your details so that we may contact you about future courses and for our statistical purposes Yes No

To enable this enquiry to be tracked please insert both month and year together with enquiry number and tick relevant curriculum area:

Month/Year:

Tracking sheet No:

- Arts & Crafts
- Humanities
- ICT
- Languages
- Skills for Life
- Sports/Leisure
- Wider Family Learning
- Other