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### Pre-Course Questionnaire

In order to help us identify your current skills and training requirements, please complete the following questions then fax this form to **Ros Donaldson** on **0131 718 4250**, or send by email to **info@tidalfire.com**

#### General Information (Please complete this section in BLOCK CAPITALS)

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Company: \_\_\_\_\_

Email: \_\_\_\_\_

Telephone: \_\_\_\_\_

Course Title: \_\_\_\_\_

Course Date: \_\_\_\_\_

#### Current Skills

Please indicate the **V**ersion of the application that you presently use by completing the **V** column. Based on a scale of 0 to 5 (0 = None and 5 = Advanced) please rate your **S**kills in using the applications/technologies by completing the **S** column

Application	V	S	Application	V	S	Application	V	S
Adobe Acrobat (full version)			HTML			ColdFusion		
Adobe Photoshop			Cascading Style Sheets			Dreamweaver		
Adobe InDesign			Adobe After Effects			Fireworks		
Adobe Illustrator			Adobe Premiere			Flash		
Adobe PageMaker			Apple Final Cut Pro			FreeHand		
QuarkXPress			Windows			Mac OS		

#### Training Requirements

Based on our course factsheet, please specify the subject areas of the course which are of most importance to you:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please state any objectives or additional subjects you would like to have addressed during the course:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date: