**RHS Level 2 Certificate in the Principles of Horticulture**

**Distance Learning**

Initial Assessment

Name:

Date:

1. Do you have regular access to laptop or desktop computer? Yes/No
2. Do you have regular e-mail access? Yes/No
3. Are you in employment? Yes/No

If yes, what is your occupation?

1. Is your employment full or part-time? FT/PT
2. How many hours do you have available for study each week?
3. Do you have any additional needs that you would like to tell us about? Yes/No

If yes, please add further detail

1. What do you hope to achieve from this course?
2. Do you have any particular concerns or worries about the course?
3. Do you have access to a garden? Yes/No

Please write a short description (100-300 words) about one of the following:

1. Your garden and the plants you grow.
2. A garden that has inspired you
3. A garden that you have visited recently

You can type your answer here, or hand write it, scan and email.

Please return to: parttime@craven-college.ac.uk