



# 3 MONTH RESPONSE FORM



## STUDENT INFORMATION

Registered Family Name:	<input type="text"/>	Email Address:	<input type="text"/>
Home Phone No:	( <input type="text"/> ) <input type="text"/>	Date of Installation:	<input type="text"/> / <input type="text"/> / <input type="text"/>
Student Names:	<input type="text"/>		

## OVERVIEW

All registered students should be using CAMI and feeling more confident after the first three months of use. We wish to see all students attain their goals and reap the rewards of higher scholastic achievement. To this end we are dedicated to helping you in any way possible. It is important, for your own achievement that a review is taken after 3 months of using CAMI, so that we can identify areas we can assist you further.

## 3 MONTH RESPONSE QUESTIONS

In order to ensure that we give you the best possible service and support, please complete the following questionnaire and either mail or fax directly back to us. It is imperative that we receive this response sheet as it is part of the terms and conditions of your warranty.

Please write YES or NO where appropriate and furnish further details if necessary.

### General

Have you integrated CAMI regularly?	<input type="checkbox"/>
Have you stuck to your study plan?	<input type="checkbox"/>
Have you found the plan helpful?	<input type="checkbox"/>
Have you used any Maths worksheets?	<input type="checkbox"/>
Are you revising school work daily?	<input type="checkbox"/>

### Timing and Execution on Maths

What is the max **weekly** time spent on Maths?

90 Minutes	<input type="checkbox"/>	60 Minutes	<input type="checkbox"/>
30 Minutes	<input type="checkbox"/>	15 Minutes	<input type="checkbox"/>
Less	<input type="checkbox"/>	More	<input type="checkbox"/>

If different how much time?

### Ease of Use - Confidence

Do you feel confident using the following?

Maths	<input type="checkbox"/>	Reader	<input type="checkbox"/>
Perceptual Skills Builder	<input type="checkbox"/>		
Printing or Emailing Reports	<input type="checkbox"/>		

### Reporting and Feedback

***Are you aware reports must be sent monthly i.e. No Reports = No Feedback?***

Have you sent at least 3 CAMI reports?

Have you received feedback for each?

### Improvement

Have you seen an improvement in?

Mental computation & Performance	<input type="checkbox"/>
Overall Maths Understanding	<input type="checkbox"/>
Reading Speed & Comprehension	<input type="checkbox"/>

### Support and Tutoring

Have you needed to use a CAMI tutor?

Did they help?

***Would you like further assistance in:***

Maths	<input type="checkbox"/>	English	<input type="checkbox"/>	TS	<input type="checkbox"/>
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## Comments or Further Assistance Required

TS = Technical Support

Please return this form by email, fax or post to:  
 E: [tutor@learnmaths.com.au](mailto:tutor@learnmaths.com.au) | F: 02 9410 1846  
 PO Box 5126, West Chatswood, NSW 1515, AUSTRALIA