

MHS Field House - Community Ed & Recreational Services

Learn – Play – Participate

Participant Evaluation

Class title: _____ Session: _____

How satisfied were you with the following: (please rate 1-5, 1 being least satisfied, 5 being most satisfied)

Program Schedule:

- | | |
|---------------------------------|-------------------------|
| 1. Overall length of program | 1 2 3 4 5 - other _____ |
| 2. Day and time of this course? | 1 2 3 4 5 - other _____ |

Facility:

- | | |
|--|-----------|
| 1. The facilities used for this program? | 1 2 3 4 5 |
| 2. Safety of facility? | 1 2 3 4 5 |
| 3. Accessibility of facility? | 1 2 3 4 5 |
| 4. Preparedness of facility (Ready to go)? | 1 2 3 4 5 |

Equipment and Supplies:

- | | |
|---|-----------|
| 1. Appropriateness of equipment provided? | 1 2 3 4 5 |
| 2. Safety of Equipment? | 1 2 3 4 5 |

Instructor:

- | | |
|--|-----------|
| 1. The instructor's enthusiasm for his/her interest area? | 1 2 3 4 5 |
| 2. Treated participants fairly? | 1 2 3 4 5 |
| 3. Preparedness of instructor? | 1 2 3 4 5 |
| 4. Communicated effectively with participants? | 1 2 3 4 5 |
| 5. Was effective in class teaching skills? | 1 2 3 4 5 |
| 6. Did the instructor try to sell/push their product on you? | Yes - No |
| 6. The overall quality of instruction in this class or activity? | 1 2 3 4 5 |

Cost:

- | | | | |
|------------------------|--------------|---------|------------------|
| 1. Overall course fee? | Satisfactory | Neutral | Not Satisfactory |
|------------------------|--------------|---------|------------------|

Please feel free to provide any additional comments or suggestions:

Please use the back of the page if needed.

1. What one recommendation do you have for improving this class?
2. Do you have suggestions for new programs or classes and possible instructors?
3. Write any additional comments or suggestions concerning the course or the community ed & recreational services program.
4. Where did you hear about this class? _____

Please return to Instructor or the MHS Field House Office

MHS Field House - Community Ed & Recreational Services

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Instructor Evaluation

Instructor name: _____

Class: _____

Location: _____

Session of classes: _____

Please comment briefly on the following:

- 1. Problems encountered that had an effect on course or participant progress:**

- 2. Recommendations for improvement of the class:**

- 3. Was the help from the community ed & Recreational Services office satisfactory for your class:**

- 4. Communication from the Field House dept. on class information, materials, location and etc.**

- 5. Were the Classroom facilities appropriate for your class?**

- 6. Would you be interested in teaching next session?**

- 7. Additional comments – please use back of page for additional space to write:**

Thank you again for teaching a class with our Community Ed & Recreational Services program we hope it was as rewarding for you as it was for the participants that participated in this class.