



Lakewood Community Education Program Evaluation

Please help us maintain our quality programs. Please complete this form and return it to the designated camp or mail it to our office at: 14100 Franklin Blvd., Lakewood, OH 44107. Thank you for your time!

Program: _____ **Time:** _____

Instructor: _____ **Dates:** _____

Participant Demographic Data (Please Circle Appropriate Responses)

Gender	Residency	Age	Education
Male	Resident	Age 18-30	High School
Female	NonResident	Age 31-54	College
		Age 55+	Post College

Staff Feedback (Please circle your responses)

- The instructor was very knowledgeable about the topic.

Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1	2	3	4	5
- The instructor was enthusiastic and entertaining when presenting the topic.

Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1	2	3	4	5
- The instructor used the allotted time well.

Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1	2	3	4	5

Please provide any additional comments that you have about the instructor (Please feel free to use the back of the page).

Program Feedback

- Overall, we were very satisfied with this Lakewood Community Recreation and Education Department Program.

Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1	2	3	4	5
- I would recommend this program to someone else.

Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1	2	3	4	5
- How did you hear about this program?
- What was your purpose for enrolling your child in this program?
- Did this program fulfill your expectations? Why or why not?
- What new community education opportunities would you like to see offered by the Lakewood Community

Additional comments appreciated (Please feel free to use the back of the page).