

Program Evaluation Form

We appreciate you taking time to fill out the following evaluation. Your assistance in evaluating our programs and services helps us to improve. It is very important to get your feedback. We thank you for your time, suggestions, and participation!

Program: _____

Participant's Grade / School: _____

How did you hear about this program?

- | | | |
|------------------------------------|--|--|
| <input type="checkbox"/> Newspaper | <input type="checkbox"/> City Newsletter | <input type="checkbox"/> Banners and Signs around town |
| <input type="checkbox"/> Flyer | <input type="checkbox"/> Website | <input type="checkbox"/> Coach |

How did we do?

Based on your experience in this program, please rate your satisfaction with our ability to provide each of the following

Registration	1=poor 5=high	Program	1=poor 5=high
Publicity prior to registration	1...2...3...4...5...NA	Fees	1...2...3...4...5...NA
Registration process	1...2...3...4...5...NA	Organization	1...2...3...4...5...NA
Customer service	1...2...3...4...5...NA	Youth officiating	1...2...3...4...5...NA
Polite, courteous staff	1...2...3...4...5...NA	Scorekeeping	1...2...3...4...5...NA
Ease of online registration	1...2...3...4...5...NA	Staff on time	1...2...3...4...5...NA

If anything rated 1 or 2 please indicate why.

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The Coach	1=poor 5=high
Taught new skills	1...2...3...4...5...NA
Knowledge	1...2...3...4...5...NA
Communicates with parents	1...2...3...4...5...NA
Communicates with players	1...2...3...4...5...NA
Didn't go over practice time	1...2...3...4...5...NA
Created good environment	1...2...3...4...5...NA

If anything rated 1 or 2 please indicate why.

Player's Thoughts	1=poor 5=high
Did you like coach?	1...2...3...4...5...NA
Did you have fun?	1...2...3...4...5...NA
Learned new skills	1...2...3...4...5...NA
Make new friends	1...2...3...4...5...NA

If anything rated 1 or 2 please indicate why.

If you could change one thing (no matter how small) to improve the program, what would it be?

More on the back

Would you participate in this program again? Yes No

Why? _____

In what ways might the Parks & Recreation Department better serve you? _____

- Please keep my survey confidential
- I would like to be entered in the contest to win a basketball

Name _____

Address _____

Phone # _____

We are creating e-mail list for notification of upcoming recreation programs.

- Please add me to your recreation e-mail

My e-mail _____

Please turn in your survey to the Parks & Recreation Office during office hours 8 AM – 5 PM located at 720 W 100 N, or you may turn them in to any Farmington City employee at the basketball games.