

# Bonny Slope Elementary After School Enrichment Evaluation Form

Class Title: \_\_\_\_\_ Date: \_\_\_\_\_ Grade: \_\_\_\_\_

Please rate the following: (1 = Low/Poor quality . . . . . 4 = High/Excellent quality)

### Program Quality:

- ◆ Class content met expectations      1   2   3   4
- ◆ Student enjoyment                      1   2   3   4
- ◆ Student involvement                    1   2   3   4
- ◆ Grade level appropriateness         1   2   3   4

### Presenter Evaluation:

- ◆ Enthusiasm                                1   2   3   4
- ◆ Ability to interact with students      1   2   3   4
- ◆ Classroom/audience management     1   2   3   4
- ◆ Professionalism                          1   2   3   4

Did this class heighten your child's curiosity?       not at all     very little     somewhat     very much

Did your child learn something new?                 not at all     very little     somewhat     very much

How likely are you to recommend this program to others?       not at all     very little     somewhat     very much

What other classes would you like to see offered? \_\_\_\_\_

Additional feedback: \_\_\_\_\_

***Submit completed form to Educational Support box in volunteer office or send an email to [bscoedsupport@gmail.com](mailto:bscoedsupport@gmail.com).***