

Course Evaluation Form for Participants

Comprehensive One-Evening Cub Scout Leader Position-Specific Training

Date: _____ Name (optional) _____

***Circle one number for each question, using a rating system from 1 to 4 (1 = poor; 4 = excellent).
A separate section is provided at the end of this form for written comments or suggestions.***

- | | | poor | | excellent |
|--|---|------|---|-----------|
| 1. Were the learning objectives (stated at the beginning of the course) met? | 1 | 2 | 3 | 4 |
| 2. Was the course run efficiently (started on time, breaks, ended on time)? | 1 | 2 | 3 | 4 |
| 3. Did the facilities (space, seating, lighting, temperature) meet your needs? | 1 | 2 | 3 | 4 |
| 4. Did the schedule date for this course meet your needs? | 1 | 2 | 3 | 4 |
| 5. Were pre-course announcements, notices, and descriptions accurate? | 1 | 2 | 3 | 4 |
| 6. Did the course literature, materials, and equipment meet your needs? | 1 | 2 | 3 | 4 |
| 7. How well was the staff prepared to deliver the course material? | 1 | 2 | 3 | 4 |
| 8. Did the course include opportunities for fun and fellowship? | 1 | 2 | 3 | 4 |
| 9. Did the course pace (length, activities, sequence) meet your needs? | 1 | 2 | 3 | 4 |
| 10. Did the course content and depth meet your needs? | 1 | 2 | 3 | 4 |
| 11. Was appropriate recognition given to everyone who completed the course? | 1 | 2 | 3 | 4 |
| 12. Would this course be useful for other adult members of your pack? | 1 | 2 | 3 | 4 |
| 13. All things considered, how would you rate this course overall? | 1 | 2 | 3 | 4 |
| 14. Would you consider serving as a staff member for a future offering of this course? | | | | |
| 15. What was the most important thing you learned in this course? | | | | |
| 16. What was the least important thing you learned in this course? | | | | |

Please use the remaining space below and other side of this form for written comments or suggestions: