



Peekskill Parks & Recreation Department • 1 Robin Drive
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PROGRAM EVALUATION FORM

Your feedback is important to us! Therefore, in an effort to better serve the community and to ensure the utmost quality of our programs, the Peekskill Parks & Recreation Department would appreciate if you would take a moment to complete this evaluation form and return it to the site/program coordinator,

Program Name: _____
Participant's gender: Male ☐ Female ☐ Grade: _____ Age: _____

Please rate the following based on the listed descriptions:

5 = Excellent	Program expectations were exceeded
4 = Good	Program expectations were met and sometimes exceeded
3 = Satisfactory	Program and expectations were adequate and improvements could be made
2 = Poor	Program often failed to meet expectations and improvements could be made
1 = Unacceptable	Program consistently failed to meet expectations and improvements are a must

Recreation and Administration

Publicity prior the start of the program:	5	4	3	2	1
Activity/Program fees:	5	4	3	2	1
Professional & Courteous Staff	5	4	3	2	1
Program Organization	5	4	3	2	1
Overall, how would you rate this program?	5	4	3	2	1

Additional Comments: _____

Instructor and Staff

Knowledge of Program:	5	4	3	2	1
Presentation of Program:	5	4	3	2	1
Professional attitude and appearance:	5	4	3	2	1
Communication with parents and students:	5	4	3	2	1

Additional Comments: _____

Facility and Schedule

Overall condition and cleanliness:	5	4	3	2	1
Condition of equipment:	5	4	3	2	1
Convenient (class time and location):	5	4	3	2	1

Additional Comments: _____

Please answer the following questions:

- How did you hear about the program? _____
- Did you/your child have fun? _____
- Would you recommend the program to a friend? _____
- Do you feel the program was worth the fee you paid? _____
- What did you enjoy the most about the program? _____
- What did you enjoy the least about the program? _____
- Suggestions for other programs you would like to see the department offer: _____
