

Howell Conference and Nature Center Program Evaluation Form

School/Group Name _____ (Please circle one) **Teacher** **Chaperone**

Date of Visit _____ Reservation Status: Day Use _____ Overnight _____

In the statements below please place an X in the box that best represents how you feel about your visit. Your answers will help enable us to better evaluate our facility.

Food Service	Excellent	Good	Fair	Poor
There was enough food prepared for your group.				
The quality of the food was....				
Your overall meal time experience was.....				

Facilities	Excellent	Good	Fair	Poor
Overall appearance of lodging was....				
The maintenance of the grounds				

Personal Satisfaction	Excellent	Good	Fair	Poor
Reservation and scheduling process.				
My expectations were met or exceeded.				
The program was a positive experience.				
The staff contributed to us having a meaningful experience.				

Please give us your comments on your Howell Nature Center experience.

What did your students enjoy the most about their experience at the HNC?

What did your students like least about their experience at the HNC?

Please complete both sides of this form

What did you as a teacher/chaperone enjoy the most about your experience at the HNC?

What could be done to improve your overall experience?

Feedback for our staff (Professional in manner, speech, rapport with audience, appearance, the use of guest names etc...)

Would you like to be informed of special events and programs? Yes No

Name: _____ Address: _____

Additional Comments:

Thank you for your time and cooperation.

**Randy Mannor
Program Director**