



Pre-Visit Assessment

Thank you for joining us at the Howell Nature Center—we're very happy to host your group! Please take a moment to complete the following questionnaire, so we can better support your goals in visiting the Howell Nature Center.

Group Name _____ Program Date _____

Contact Name _____

Have you joined programs at HNC in the past? Which programs?

Please describe your participants:

___ K ___ 1st-2nd ___ 3rd-4th ___ 5th-6th ___ 7th-8th ___ High school ___ Adult

Total number of participants:

Number of teachers _____

Number of chaperones _____

Number of male students _____

Number of female students _____

Our goal is to create a successful environment for all participants. Do any participants require accommodation of different abilities or other needs? Please describe:



What are your goals in attending programs at the Howell Nature Center? Check all that apply:

- | | |
|---|--|
| <input type="checkbox"/> Curriculum reinforcement | <input type="checkbox"/> Student-guided activities |
| <input type="checkbox"/> Outdoor exploration | <input type="checkbox"/> Recreation/group bonding |
| <input type="checkbox"/> Wildlife | <input type="checkbox"/> Social Skills |
| <input type="checkbox"/> Knowledge of natural resources | <input type="checkbox"/> Strategic goal setting |
| <input type="checkbox"/> Hands-on learning | <input type="checkbox"/> Problem-solving |

Please expand upon these goals:

If you are using programs to support classroom lessons, please describe key terms and concepts you would like us to reinforce:

What else should we know about your group?
