

# End-of-program parent survey

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Thank you for being part of [Program name] this [season]! Please take five minutes to tell us how it went.  
You don't need to put your name on it.

## About your child

Program and session \_\_\_\_\_

Child's age or grade (optional) \_\_\_\_\_

## Ratings

Write a number from 1 to 5 for each: 1 = poor or strongly disagree, 5 = excellent or strongly agree.

Overall experience \_\_\_\_\_

Activities and what your child learned \_\_\_\_\_

Staff were caring and paid attention to my child

\_\_\_\_\_

My child felt safe \_\_\_\_\_

Communication from the program \_\_\_\_\_

Drop-off and pickup \_\_\_\_\_

Registration and payment \_\_\_\_\_

Value for the cost \_\_\_\_\_

## Your child's experience

Check all that apply. Because of this program, my child:

- ☐ Made new friends
- ☐ Tried something new
- ☐ Became more confident
- ☐ Was more active
- ☐ Learned a new skill
- ☐ Looked forward to coming

## Your thoughts

What did your child enjoy most? \_\_\_\_\_

What should we do better? \_\_\_\_\_

What would you like us to add next time? \_\_\_\_\_

## Next time

Check any that are true.

- ☐ We plan to come back next [season or year]
- ☐ We'd recommend the program to a friend

If you might not come back, why? (optional) \_\_\_\_\_

## Optional

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☐ You may share my comments, without my name, in reports and on your website

Your name and phone or email, if you'd like us to follow up

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