

SUFFIELD PARKS AND RECREATION DEPARTMENT
PROGRAM EVALUATION
668-3862

In order that we may continually improve our service to the public, the Parks and Recreation Department would appreciate your personal comments on the following subjects:

PROGRAM ATTENDED: _____ DATE: _____

1. Did you or your child attend the program on a regular basis?

Yes _____ No _____ If not, why not? _____

2. Please rate the facility? 1 2 3 4 (4 being excellent)

Comments: _____

3. Was the staff/volunteers courteous and attentive? _____

4. Procedures followed by the staff/volunteers were:

_____ excellent _____ very good _____ good _____ fair _____ poor _____.

5. Did the staff/volunteers meet your expectations? _____

6. What did you like about this program? _____

7. What improvements could be made in this program? _____

8. Was the fee reasonable? _____

9. Where did you learn about this program? _____

10. Additional comments: _____

Please return, as soon as possible, to the:

Suffield Parks & Recreation Department
83 Mountain Road
Suffield, CT 06078