



Date: _____

Name: _____
(optional)

Please take a moment to fill out the survey below. Your feedback is important to us, and we appreciate any comments you would like to contribute (please feel free to remain anonymous). Thank you, and have a great summer!

1. Were you satisfied with the program this year?

2. Did the program meet your needs?

3. What did you like best about the program?

4. What did you like the least?

5. What did your child like best?

6. What did your child not like?

7. Did your child feel happy here?

8. Do you have any concerns that weren't addressed during the school year?

Also use this space for any additional comments you wish to leave.
