



School/Group Name _____

Date _____

Museum Program _____

Time _____

Overall Program

1=poor, 2=fair, 3=good, 4=excellent

Program introduction	1 2 3 4	Hands-on activities (enough?)	1 2 3 4
Program Content	1 2 3 4	Pace	too fast / good / too slow
Grade level suitability	1 2 3 4	Program Wrap-up	1 2 3 4
Relevance to curriculum	1 2 3 4	Booking Procedure	1 2 3 4
Use of artifacts/specimens	1 2 3 4	Value for Price	1 2 3 4

Comments

First Interpreter

Name _____

Knowledge	1 2 3 4	Volume	1 2 3 4	Grade Appropriate Language	1 2 3 4
Enthusiasm	1 2 3 4	Clarity	1 2 3 4	Encouraged Participation	1 2 3 4
Organization	1 2 3 4	Leadership	1 2 3 4	Flexibility	1 2 3 4

Comments

Second Interpreter

Name _____

Knowledge	1 2 3 4	Volume	1 2 3 4	Grade Appropriate Language	1 2 3 4
Enthusiasm	1 2 3 4	Clarity	1 2 3 4	Encouraged Participation	1 2 3 4
Organization	1 2 3 4	Leadership	1 2 3 4	Flexibility	1 2 3 4

Comments

Will you book programs for classes in the future? Why or why not?

What topics would you like to see addressed in programs for the future?

Additional comments / Suggestions

Can we contact you to follow-up on your ideas?

If yes, Name _____

Phone _____

Number _____

Thank you for your time and consideration in completing this form. Your comments are very important to us. Please return completed

evaluations to your interpreter, the Museum Reception Desk, or mail to:

Coordinator of Education Programs
190 Rupert Avenue
Winnipeg, Manitoba

R3B 0N2

or send by fax: 942-3679

Museum Visit