



# Castlewood Canyon: Wonders of Nature Evaluation Form

Name of School \_\_\_\_\_ Date of Visit \_\_\_\_\_

Name of person completing this evaluation \_\_\_\_\_

Please circle your answer.

1. Was this the first time you have brought a class to this site? Yes    No
2. If not, how many times (including this one) have you visited with your class? \_\_\_\_\_
3. Was the Volunteer Naturalist guide's interaction with the class appropriate and informative? Yes    No
4. Did the program begin on time? Yes    No
5. Did your students have the opportunity to: Yes    No
  - a. Be exposed to nature? Yes    No
  - b. Interact appropriately with nature? Yes    No
  - c. Exhibit respect for living things and their habitat? Yes    No
  - d. Visit a place they would be unlikely to go otherwise? Yes    No
6. Was the program: Yes    No
  - a. Age appropriate? Yes    No
  - b. Interesting and informative? Yes    No
  - c. An appropriate length? Yes    No
7. Did this program meet your expectations?  
Better than expected                      As expected                      Not as expected                      Not at all

8. Anything else you would like us to know?

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