



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?

