

	CS – Program Feedback	Community Services
	<p align="center"> Program Feedback Our programs are always evolving, and we welcome and appreciate parent/guardian feedback. Please complete all sections. </p>	
Program Information		SECTION 1
<p> Program Name _____ (example: Preschool, After School Program, Day Camp) </p> <p> Program Location _____ (example: Southlands Community Centre, Kilbride Community Centre) </p> <p> Today's Date (yyyy-mm-dd) _____ </p>		
Leaders' Interactions		SECTION 2
<p> 1. Leaders show warmth, interest, respect, involvement and positive leadership towards participants and parents/guardian. Please select all that apply: </p> <p align="center"> Smiles Friendly tone Respectful communication Enthusiasm </p> <p> Other _____ </p> <p> 2. Please comment on the program leaders' interactions. </p>		
Supervision and Safety		SECTION 3
<p> 1. Leaders are aware of all participants, paying attention to safety concerns and adjusting supervision to ages and activities. Please select all that apply: </p> <p align="center"> Constant supervision Secure play areas Adequate number of staff </p> <p> Other _____ </p> <p> 2. Please comment on the program supervision and safety measures. </p>		

1. Participants show respect towards each other. They appear to be having fun and including each other in activities. Please selection all that apply:

Smiles and laughter

Knowing each other's names

Minimal conflicts

Other _____

2. Please comment on participant interactions.

3. Why did you choose to enroll your child(ren) in this program?

4. Is there anything you feel we can do to improve your child(ren's) experience in this program?

5. What does your child(ren) like most about our program?

6. Has your child(ren) experienced any challenges with our program?

7. Any additional comments

Privacy Notice**SECTION 5**

Collection of personal information via this form is authorized under the Access to Information and Protection of Privacy Act, 2015 and is needed to process this form. Questions about the collection and use of the information may be directed to Manager of Community Programs and Services by calling 709-576-8020 or email recreation@stjohns.ca

Please send completed form to:

Recreation Division
P.O. Box 908, 10 New Gower Street
St. John's, NL A1C 5M2

For further information:
Phone: 709-576-8499/8631
Email: recreation@stjohns.ca

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