

POST CAMP SURVEY – LEADER EVALUATION

We would like to incorporate your feedback into our analysis of the summer camp experience. Please answer the following questions and return this form in the postage-paid envelope. Thank you.

1. What is the name of your Scout summer camp?

2. Did you set goals for what you personally wanted to accomplish during summer camp?

Please check one.

Yes No - Skip to question 4

3. If yes, to what extent did you accomplish your goals? *Please check one.*

- Met all of my goals
 Met some of my goals
 Met a few of my goals
 Met none of my goals

4. Overall, to what extent did your summer camp trip meet your expectations? *Please check one.*

- A lot better than I thought it would be
 Better than I thought it would be
 About what I thought it would be
 Not quite as good as I thought it would be
 Far worse than I thought it would be

5. To what extent do you agree or disagree that each of the following happened for you at the summer camp you attended this year? Please write the rating that best describes your experience in the box following each factor.

SCALE: 5 = Strongly agree 2 = Somewhat disagree
 4 = Somewhat agree 1 = Strongly disagree
 3 = Neutral

<u>FACTOR</u>	<u>RATING</u>	<u>FACTOR</u>	<u>RATING</u>
Built friendships with other leaders	<input type="text"/>	Played a role in helping young people succeed/grow	<input type="text"/>
Reduced your stress	<input type="text"/>	Built friendships with youth in unit/crew	<input type="text"/>
Learned from other leaders	<input type="text"/>	Was with people I respect	<input type="text"/>
Learned things about youth (increased understanding)	<input type="text"/>	Helped youth realize their own abilities	<input type="text"/>
Felt close to nature	<input type="text"/>	Had fun	<input type="text"/>

6. Including this time, how many times have you attended Scout summer camp as an adult?

7. How many years have you been a Scout leader? years

8. What is your current registered position in Scouting?

9. How many boys and leaders are in your entire troop? Boys Leaders

10. Are you an Eagle Scout? Yes No

11. What is your age? years

12. Are you ... Male Female

THANK YOU. PLEASE RETURN THE SURVEY IN THE ENVELOPE PROVIDED.