



SHAWANO SCHOOL DISTRICT

Community Education Course Evaluation

Date _____

Course Title _____

Instructor _____

Is this your first Community Education class/activity? YES NO

How did you hear about this class?

Before taking this class/activity, rank your knowledge on this subject:

(Low) 1 2 3 4 5 (High)

After taking this class/activity, rank your skill or knowledge:

(Low) 1 2 3 4 5 (High)

What are the three most important benefits that you receive from a workshop/class/activity such as this?

___ meet new people

___ fun and relaxing

___ emotional/physical wellness

___ gain new skills/knowledge

___ job enhancement

___ motivational

___ explore a new interest

___ build self esteem

___ connecting with the community

___ enhance relationships

___ other

(explain) _____

Additional Comments:

SCE eNews: If you would like to receive updates about Community Education classes, activities, programming or volunteer opportunities, join our SCE eNews group.

Email: _____

Your email address will never be sold or shared with other organizations.