

Paradise Valley Community College

Student Life & Leadership Low Ropes/Teambuilding

Participant Evaluation Form

Your feedback is important to our continued development of the PVCC Low Ropes and Teambuilding Program. Please complete and return the following form in regards to your personal and/or group's experience.

Group or Class Name:

Date Attended:

Overall, how satisfied were you with the program?

Dissatisfied

Satisfied

Very Satisfied

Please Explain:

Overall, how well did this experience meet your expectations?

Below Expectations

Met Expectations

Exceeded Expectations

Please Explain:

What activities/elements did you find most beneficial to your group needs?

Tarp

Spider Web

TP Shuffle

Ball/Ring

Blind Polygon

Star

Helium Stick

Wall Traverse

Trust Fall

Other (please list):

What activities/elements did you find the least beneficial to your group needs?

Tarp

Spider Web

TP Shuffle

Ball/Ring

Blind Polygon

Star

Helium Stick

Wall Traverse

Trust Fall

Other (please list):

Would you consider using the PVCC Low Ropes/Teambuilding program again?

Yes

No

Would you recommend the PVCC Low Ropes/Teambuilding program to others?

Yes

No

Additional comments about: (staff, faculty, organization, etc.)

Thank you for participating in Paradise Valley Community College's Low Ropes/Teambuilding Course.

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