

**Osher Lifelong Learning Institute at Clemson University  
Excursion Participant Evaluation**

Please take a few minutes to complete this brief evaluation form. Include any ideas you may have for future classes, including contact information for instructors/facilitators who you think might be interested. Thank you for your time.

Course Name: \_\_\_\_\_ Instructor Name: \_\_\_\_\_

For each question, indicate the degree of your agreement or disagreement with the statement according to the following scale: 1=Strong Agree; 2=Agree; 3=Neutral; 4=Disagree; and 5=Strongly Disagree.

	Strongly Agree				Strongly Disagree
	1	2	3	4	5
1. The excursion met my expectations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. The excursion was well-planned.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. The transportation was comfortable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The group size was acceptable for this excursion.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. The facilitator was very helpful.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. The meeting location for this excursion was easily accessible.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. In the future I will participate in another OLLI excursion.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. I would recommend OLLI excursions to other students.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments: \_\_\_\_\_

9. What did you like best about this excursion? \_\_\_\_\_

\_\_\_\_\_

10. How could the excursion be improved? \_\_\_\_\_

\_\_\_\_\_

11. We need your help with suggestions for other excursions and courses with possible instructors. Please make your suggestions below.

\_\_\_\_\_ Possible class topics

\_\_\_\_\_ Potential instructor/facilitator

\_\_\_\_\_

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