

ROTARY SCOUT RESERVATION

SUMMER CAMP PROGRAM EVALUATION

Now that you have completed your week with us here at Rotary Scout Reservation, please take a few minutes to let us know how we are doing. Please comment on the strengths and weaknesses of the camp and program that you have observed. Detailed feedback is greatly appreciated, and suggestions are always welcome.

1 – Poor 2 – Needs Improvement 3 – Satisfactory 4 – Good 5 – Excellent N – Not Applicable

PRE-CAMP SUPPORT

Comments

Camp Website: <i>www.rsbsa.org</i>	1	2	3	4	5	N	
Communications with Council Service Center	1	2	3	4	5	N	
Communications with Camp Administration	1	2	3	4	5	N	
Pre-Camp Troop Visit By Camp Staff	1	2	3	4	5	N	
Camp Guide For Leaders and Parents	1	2	3	4	5	N	
Additional comments on the above: _____							

GENERAL CAMP OPERATIONS

Arrival at Camp & Check-in	1	2	3	4	5	N	
Camp Administration Support	1	2	3	4	5	N	
Health Services	1	2	3	4	5	N	
Menu	1	2	3	4	5	N	
Quality of Food	1	2	3	4	5	N	
Quantity of Food	1	2	3	4	5	N	
Dining Hall Operation	1	2	3	4	5	N	
Patrol Cooking Support	1	2	3	4	5	N	
Family Night Bar-B-Que and Program	1	2	3	4	5	N	
Trading Post Operation	1	2	3	4	5	N	
Quartermaster	1	2	3	4	5	N	
Campsite Visitations & Commissioners	1	2	3	4	5	N	
Maintenance & Facilities	1	2	3	4	5	N	
Additional comments on the above: _____							

CAMP PROGRAMS

Please evaluate camp programs based on the staff, the facilities, and the overall program.

	Staff					Facilities					Overall Program								
Archery	1	2	3	4	5	N	1	2	3	4	5	N	1	2	3	4	5	N	
Aquatics	1	2	3	4	5	N	1	2	3	4	5	N	1	2	3	4	5	N	
Chillicothe	1	2	3	4	5	N	1	2	3	4	5	N	1	2	3	4	5	N	
COPE / Climbing	1	2	3	4	5	N	1	2	3	4	5	N	1	2	3	4	5	N	
Community Safety	1	2	3	4	5	N	1	2	3	4	5	N	1	2	3	4	5	N	
Ecology	1	2	3	4	5	N	1	2	3	4	5	N	1	2	3	4	5	N	
Handicrafts	1	2	3	4	5	N	1	2	3	4	5	N	1	2	3	4	5	N	

	Staff						Facilities						Overall Program						
Rifle Range	1	2	3	4	5	N	1	2	3	4	5	N	1	2	3	4	5	N	_____
Scoutcraft	1	2	3	4	5	N	1	2	3	4	5	N	1	2	3	4	5	N	_____
Trail to First Class	1	2	3	4	5	N	1	2	3	4	5	N	1	2	3	4	5	N	_____
Adult Training	1	2	3	4	5	N	1	2	3	4	5	N	1	2	3	4	5	N	_____

Additional comments on the above: _____

How would you rate your overall camp experience this week? (please circle one)

Poor Needs Improvement Satisfactory Good Excellent

Please comment on the **strengths** of the camp (including program, facilities, staff, administration, food, trading post, campsites, etc.)

Please comment on the **weaknesses** of the camp (including program, facilities, staff, administration, food, trading post, campsites, etc.)

How did you first hear about Rotary Scout Reservation?

What is the likelihood of you recommending this camp to others?

Highly Unlikely Unlikely Somewhat Likely Likely Highly Likely

What specific changes or additions might you suggest to improve your camp experience?

Which week did your troop attend camp? 1 2 3 4 5 6

Evaluator _____ Scoutmaster / Adult Leader
 _____ Senior Patrol Leader / Youth

Name _____ Troop _____

***Thank you for your time and input!
 We hope to see you again next year!***