



PROGRAM EVALUATION

Thank you for selecting the King Center arts and cultural program. Your input is very important to us when future program plans are being made. To help us ensure we are offering the programs you desire, please share with us how the program met its objective, its relation to your curriculum and cultural experience. You may use this form or submit via www.kingcenter.com

Your name _____ Today's date _____
 School name _____ Phone number _____
 Production Title: _____ Gr. Level of students' _____

Described your overall evaluation of the program: Very Satisfied Satisfied Not Satisfied

What did you and your students expect to gain from the program? _____

Did the program meet with your satisfaction? Very Satisfied _____ Satisfied _____ Not Satisfied _____

What kind of experience did the program provide? Motivational _____ Educational _____ Entertainment _____ Other _____

Please tell us why you selected this program: Age Appropriate _____ Monetary Value _____ Production Content _____

Were they study guides used for preparation? Y _____ N _____ Were the study guides useful? Y _____ N _____

How did you incorporate the study resource material into your classroom activity? _____

Describe any pre/post performance activity you did with your student(s) _____

Circle any future program you would be interested in seeing on stage

Fairy Tales	Fantasy	Magic	Mime	Musical	in school programs
Comedy	Puppet	Opera	Dance	Ballet	Patriotic
Workshop	Master Class	Issue Related	Jazz	Classic	Traveling Theatre

Other: _____
 Specific title for consideration

May we use any of your comments for future promotion of the theatre for youth and outreach program? If yes, please write legibly using dark ink pen to increase the production quality. (You may use a separate sheet of paper for additional comments)

Name a friend or colleague you would like us to send a brochure to:

Name _____ Phone number _____
 Address _____ City _____ State _____ Zip _____

What program times will work best for you? (Check your selection)

- | | |
|---|---|
| <input type="radio"/> 8AM - 9AM | <input type="radio"/> 8:30 AM – 9:30 AM |
| <input type="radio"/> 9AM – 10 AM | <input type="radio"/> 10:30 AM – 11:30AM |
| <input type="radio"/> 10AM – 11 AM | <input type="radio"/> 11:30 AM – 12:30 PM |
| <input type="radio"/> 11AM – 12 PM | <input type="radio"/> 12:30 PM – 1:30 PM |
| <input type="radio"/> 1:00 PM – 2 PM | <input type="radio"/> 1:30 PM – 2:30 PM |
| <input type="radio"/> 2:00 PM – 3:00 PM | <input type="radio"/> 2:30 PM – 3:30 PM |

Do you have an after school program/Would you be interested in after-school theatre programs? Yes No

Would you have the ability to transport to the King Center for after school program Yes No

Would you have an interest in having pre & post performance or other type of activities?

Open discussion	Yes _____	No _____
Lunch discussion	Yes _____	No _____
Roundtable Discussion	Yes _____	No _____
Lecture/Demonstration	Yes _____	No _____
Master Class	Yes _____	No _____
Artist Residency	Yes _____	No _____
School Assemblies	Yes _____	No _____
Other _____		

Does the King Center Educational Theatre Program meet the mission of providing culturally enriching programs for youth? Yes _____ No _____ Somewhat _____

How does the Theatre for Youth and Outreach Program impact your school or group?

Part of our curriculum	Yes _____	No _____	Somewhat _____
Fun	Yes _____	No _____	Somewhat _____
Motivational	Yes _____	No _____	Somewhat _____
Cultural Experience	Yes _____	No _____	Somewhat _____
Other _____			

Describe any difficulty you may have in planning to attend this event _____

Do you have a preference how you receive information about Theatre for Youth and Outreach Program

Monthly Cards _____	End of the previous school year _____
Brochure Mailing _____	Email _____
Beginning of the school year _____	Facebook/Twitter _____

Return response by mail:

- King Center 3865 N. Wickham Rd Melbourne FL 32935 Attn: TFY
- By fax: (321) 433-5817

8/2012

Thank You!

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