

Recreational Canoeing Association of British Columbia (RCABC)

Course Evaluation Form

Thank you for assisting the RCABC in developing and conducting high quality canoeing instruction in British Columbia. Your feedback is appreciated.

Course Dates: _____ Course Location: _____

Instructor Name(s): _____

Please check (✓) which course you have just completed.

	Lakewater	Moving Water I & II	Moving Water III & IV	Canoe Tripping	Canoe Poling	Ocean Canoeing	Big Boat
Paddler Level							
Instructor Level							

Regarding the course – for each of the following statements, please check (✓) the box that best reflects your feelings.

	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
The length of course was appropriate					
Course material was presented in a clear and logical manner					
Practice exercises and drills helped me learn					
I was challenged to learn new things					
Safety on the water was emphasized					
My expectations for the course were met					
Equipment provided (if applicable) was in good condition					
I feel confident with my new skills					

What section of the course did you find *most* useful? _____

What section of the course did you find *least* useful? _____

Please provide an overall rating of the course:

Excellent ____ Very Good ____ Good ____ Fair ____ Poor ____

Regarding Instruction – please check (✓) which best describes your instructor(s).

Instructor #1 Name: _____ Instructor #2 Name: _____

Instructor		Always	Frequently	Sometimes	Never
Is on time	Instructor 1				
	Instructor 2				
Is organized	Instructor 1				
	Instructor 2				
Is enthusiastic	Instructor 1				
	Instructor 2				
Is approachable	Instructor 1				
	Instructor 2				
Is attentive to my needs	Instructor 1				
	Instructor 2				
Communicates clearly	Instructor 1				
	Instructor 2				
Provides constructive feedback	Instructor 1				
	Instructor 2				
Accepts constructive feedback	Instructor 1				
	Instructor 2				
Is able to demonstrate skills	Instructor 1				
	Instructor 2				

Please provide an overall rating of your instructor:

Instructor 1 Excellent ___ Very Good ___ Good ___ Fair ___ Poor ___

Instructor 2 Excellent ___ Very Good ___ Good ___ Fair ___ Poor ___

Please provide any additional comments or suggestions here.

Thank you for taking time to complete this evaluation. Your input is valuable in helping your instructor and the RCABC monitor and improve courses.