

# 2017 Program Outcomes Feedback Student Survey



## THANK YOU!

Thank you for participating in our Theatre-In-Education program this year with enthusiasm and energy!

We need your feedback so that we can continue to improve what we offer to schools and students.

This survey is about you telling us what you liked and found valuable about your Eagle's Nest Theatre experience, and what you didn't like. Please be honest with your responses – we really appreciate your feedback and we take it very seriously.

Please fill out a copy of this questionnaire for each program (you may have participated in a Workshop as well as a Performance) presented by Eagle's Nest Theatre and return the completed form to your relevant teacher.

Thanks again and we look forward to reading and considering your responses.

Regards,

James Adler

Artistic Director, Eagle's Nest Theatre

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1. Your details:

Name: \_\_\_\_\_ Year level: \_\_\_\_\_

School: \_\_\_\_\_

2. What text or theme was addressed by the Eagle's Nest Theatre program?

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3. Which type of program did you participate in?

PERFORMANCE

WORKSHOP

Both

*Please select  
ONE*

4. Which area of study was the program aimed at?

CONTEXT STUDY

TEXT RESPONSE

Other

.....

5. How would you describe the program content and knowledge of presenter?

RELEVANT

ENTERTAINING

INSIGHTFUL

IRRELEVANT

BORING

TYPICAL

6. How would you rate the communication skills of presenter?

CLEAR

PRECISE

FRIENDLY

UNCLEAR

IMPRECISE/VAGUE

UNFRIENDLY

7. How would you rate the professionalism of the program staff?

VERY PROFESSIONAL

PROFESSIONAL

UNPROFESSIONAL

*Please select ONE*

8. What parts of the program did you find most helpful?

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9. Were there any parts of the program that you found less helpful?

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10. What improvements do you feel could be made to the program?

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11. As a student, how would you rate your engagement with the program?

VERY OFTEN ENGAGED

OFTEN ENGAGED

SOMETIMES ENGAGED

NEVER ENGAGED

12. How do you feel that the program assisted you to meet assessment requirements?

IMMEDIATE   
IMPROVEMENT

ONGOING   
IMPROVEMENT

NO IMPROVEMENT

*Please select ONE*

13. How do you feel the program assisted you in other academic areas?

*Please select ANY applicable*

Improved engagement with theatre texts

Improved engagement with non-theatre texts

Improved confidence students in

Improved critical thinking skills

discussion

Improved essay writing skills

No Improvement

14. What was your overall impression of the program?

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15. How satisfied were you with this program?

/100

16. If you had to describe one moment or one idea from this experience, what would that be?

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17. Do you have any other comments or questions for the program organisers?

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Please return your completed survey to your relevant teacher.  
We look forward to working with you again!

This Feedback form can also be completed online - just go to:  
<http://www.eaglesnesttheatre.com/2016-student-feedback.html>

THANK YOU FOR YOUR TIME!

