



BSA Leave No Trace Level 2 Instructor Course

Participant's Name Course End Date

Course Location

Course Instructors

Course Coordinator

Course Evaluation

Your feedback and especially your comments are critical to us as we work to build stronger educational programs to better meet the needs of all who enjoy the out-of-doors.

	Disagree						Agree
	1	2	3	4	5	6	7
Your personal goals and objectives for this course were met.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Comments	<input style="width: 100%; height: 60px;" type="text"/>						
There was the right amount of classroom time.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Comments	<input style="width: 100%; height: 60px;" type="text"/>						
There were enough demonstrations and hands-on activities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Comments	<input style="width: 100%; height: 60px;" type="text"/>						
The instruction was high-quality and relevant.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Comments	<input style="width: 100%; height: 60px;" type="text"/>						
The course materials, meals and group equipment were adequate.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Comments	<input style="width: 100%; height: 60px;" type="text"/>						

Disagree Agree

1 2 3 4 5 6 7

The location and time were suitable for the course.

Comments

1 2 3 4 5 6 7

The skills learned on this course will be useful.

Comments

1 2 3 4 5 6 7

The course was a good value for what you spent.

Comments

What information did you find most interesting or useful?

What suggestions do you have for improving the course?

List any additional comments?

Are you interested in volunteering for Leave No Trace in your state?

Yes
No

Would you be willing to be contacted by Leave No Trace to discuss your experience on this course?

Yes
No

If "Yes", please provide your email address and State

Instructor Evaluation

Feedback on your instructors is valuable for us as we work to build a stronger educational program.

Overall Instructor Effectiveness:

	Poor					Excellent	
	1	2	3	4	5	6	7
Lead Instructor: _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Co-Instructor(1): _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Co-Instructor(2): _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Course Coordinator: _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Presentation & Delivery Skills:

	Poor					Excellent	
	1	2	3	4	5	6	7
Lead Instructor: _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Co-Instructor(1): _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Co-Instructor(2): _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Theme, Message, Preparedness:

	Poor					Excellent	
	1	2	3	4	5	6	7
Lead Instructor: _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Co-Instructor(1): _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Co-Instructor(2): _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Area for Growth or Improvement:

Lead Instructor:

Co-Instructor(1):

Co-Instructor(2):

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