



Questionnaire for CAs 2017

CA Name (optional): _____ **Assigned Unit or Activity Station:** _____

Please rate on scale from 1 – 5 where 5 (1 = disagree strongly / low rating, 5 = agree strongly, high rating)

Training/Camp Prep

Offsite: Did you attend? Y N

- | | | | | | |
|--|---|---|---|---|---|
| 1. Health & safety review was useful in reminding me of important camp rules | 1 | 2 | 3 | 4 | 5 |
| 2. Training in activities helped me to prepare for camp | 1 | 2 | 3 | 4 | 5 |
| 3. Meeting with other CAs was helpful before Onsite | 1 | 2 | 3 | 4 | 5 |
| 4. Reviewing skills was helpful | 1 | 2 | 3 | 4 | 5 |

Onsite: Did you attend? Y N

- | | | | | | |
|--|---|---|---|---|---|
| 5. Meeting with adult volunteers and other CAs helped me to feel comfortable before camp | 1 | 2 | 3 | 4 | 5 |
| 6. Training/camp prep got me excited to be at camp. | 1 | 2 | 3 | 4 | 5 |

What would make the offsite a better prep for camp?

What would make the onsite a better prep for camp?

Interaction with adults:

What did adult volunteers do or not do that you liked (how were they helpful to you/campers)?

What did they do or not do that you didn't like (how were they not helpful to you/campers)?

How could training improve your experience with the adult volunteers?

Schedule:

What did you like about your unit/activity's schedule?

What improvements would you like to see made?

Activities: Please rate the activities you/your unit participated in.

Activity	Rating (1 – 10)	Activity	Rating (1-10)	Activity	Rating (1-10)
Cooking		Science		Rainbow Skills Demonstrations	
Crafts		Skits and Games		Unit PA Rainbow Skills	
Take Along Crafts		Dance		Rainbow First Aid	
Leather		Archery		LiA Award	
Staff Appreciation				Songs	

Based on the theme, is there an activity that would be appropriate to have next year?