

# COURSE FEEDBACK

*Please provide feedback about your experience as a student in this course. If there is something that went well, something that concerned you, or a creative idea you'd like to share - let us know! Thank you for helping us improve our programs.*

**\*\* All feedback you give shows anonymously to the course leaders unless you include identifying information. If you indicate that there was a safety concern, the information you provide will be sent to our Safety Committee. \*\***

● = required field

**Please rate your overall experience as a participant in this course. ●**

- Excellent! I enjoyed everything and learned a lot.
- It was just fine, nothing stood out as particularly positive or negative.
- It wasn't my favorite, there were quite a few things that I didn't enjoy.
- Terrible! I didn't enjoy anything about this course.

**How would you rate the course leaders and/or instructors?**

- Outstanding!
- Just fine.
- Not my favorite.
- Terrible!

Please share why you chose the above rating.

**Did the content and learning outcomes of this course match your expectations?**

- Yes! The content met and exceeded my expectations.
- Mostly. The content was about consistent with my expectations.
- Not really. There were some things that were different or that we did not cover.
- No! The content did not match or meet my expectations.

**Did this course inspire you to do any of the following? (Please check all that apply.)**

- Spend more time outdoors.
- Spend more time pursuing the activity taught in this course.
- Spend more time with people I met in this course.
- Volunteer with The Mountaineers.
- Protect our outdoor places through stewardship or advocacy.
- None of the above

**What was your favorite part about this course?**

**What would you have changed about this course?**

**Did you feel that this course was facilitated in a way that minimized our impact on the land, waterways, and other users?**

- Yes
- Somewhat
- No

**Please share why you chose the above answer.**

**Did you feel welcomed and included by the course leader(s) and other instructors?**

- Yes
- Somewhat
- No

**Please share why you chose the above answer.**

**Do you have any safety concerns about this course?**

- Yes
- No

**If yes, please describe your safety concerns. Otherwise leave blank.**

If you report a safety concern, we'll send a notification to our Safety Committee. It will contain only the information that you provide below. We may contact you if additional information is needed. Please leave this field blank if there were no safety concerns.

**Is there anything else that you'd like to share?**

**Please note that feedback cannot be edited once it has been submitted.**