



**Audubon Center  
of the North Woods**

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# Student Evaluation Form

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Please give to liaison or mail or fax to:  
Audubon Center of the North Woods  
PO Box 530, Sandstone, MN 55072  
Fax: 320-245-5272

School \_\_\_\_\_

Date \_\_\_\_\_

Group \_\_\_\_\_

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1. Are you glad you came?    Yes \_\_\_\_\_    No \_\_\_\_\_

2. How would you describe (what words would you use) the Audubon Center staff? Examples?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Which foods did you like the most?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Rate your classes:

Please list each class and evening program. Total up the number of responses for each category.

	<i>Thumbs up</i>	<i>In the Middle</i>	<i>Thumbs down</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

5. What did you like best about the classes you participated in?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. What did you like best about your stay at the Audubon Center?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7.) Would you like to come back to the Audubon Center?    Yes \_\_\_\_\_    No \_\_\_\_\_

**THANK YOU!**