



American Canoe Association Instructor Certification Course / Instructor Trainer (IT) Evaluation

Below are a list of items that will assist us learn more about the staff that offer program and the course curricula FROM YOUR POINT OF VIEW. Please fill out this form completely and earnestly. Your feedback and opinions are invaluable to us. Please provide the following:

Discipline: (check one) Canoe Kayak Safety & Rescue Rafting
Course type: (check one) IDW ICE IDW/ICE Endorsement

Course Date(s): _____

Lead IT: _____

Assisting Staff: _____

Location of Course: _____

Level of Certification: _____

Please circle your response on a scale of 1 – 5. Your additional comments are encouraged

1. Did the IT make the course goals and objectives clear?

1 – excellent 2 – good 3 – adequate 4 – less than adequate* 5 – poor* (* please clarify)

Comments: _____

2. Was the course well organized and executed?

1 – excellent 2 – good 3 – adequate 4 – less than adequate* 5 – poor* (* please clarify)

Comments: _____

3. Were the evaluation criteria clear?

1 – excellent 2 – good 3 – adequate 4 – less than adequate* 5 – poor* (* please clarify)

Comments: _____

4. Are you satisfied with the quality of the course content?

1 – excellent 2 – good 3 – adequate 4 – less than adequate* 5 – poor* (* please clarify)

Comments: _____

5. Rate the material covered in this workshop in relation to what you think you should know to teach and model.

1 – excellent 2 – good 3 – adequate 4 – less than adequate* 5 – poor* (* please clarify)

Comments: _____

6. Overall, how would you rate the IT and course staff?

1 – excellent 2 – good 3 – adequate 4 – less than adequate* 5 – poor* (* please clarify)

Comments: _____

7. Overall, how would you rate the course?

1 – excellent 2 – good 3 – adequate 4 – less than adequate* 5 – poor* (* please clarify)

Comments: _____

8. Did the IT explain the steps necessary to register your courses, find information and work towards a different level of certification within the ACA?

Comments: _____

9. Would you recommend this course?

Comments: _____

10. What changes would you make to this course if you could?

Comments: _____

11. What were the ITs strengths and weaknesses?

Comments: _____

12. Other comments:

Comments: _____

A designated candidate in the course should collect this form. Please submit all evaluations, with the Certification Course Report, within 7 days of course completion to:

***American Canoe Association
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Fredericksburg, VA 22401***

ACA Staff may be reached at sei@americancanoe.org or call 703-451-0141.