

School Sports Programme (Special School) — Course Assessment

Questionnaire

(To be provided by School)

Thank you for participating in the "School Sports Programme (Special School)" organised by the Leisure and Cultural Services Department. The purpose of this questionnaire is to hope that by the means you provide, let us make improvement for the school sports programmes in the future.

Information of the programme participated:

Application No: _____
 Name of Programme: _____
 Name of School: _____
 Date of Programme: _____
 Time of Programme: _____
 Venue: _____
 No. of Participants: _____

Please put a “✓” in the appropriate box.

	Disagree	Fair	Agree	N.A.
1. Communication between teacher and the organiser				
(a) Sufficient communication with the organizer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(b) Easy to contact the organizer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(c) Sufficient assistance provided by the organizer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Performance of instructor(s)/speaker(s)				
(a) Detailed introduction and demonstration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(b) Clear presentation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(c) Able to enhance students' interest	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Content of programme/exhibition				
(a) Moderate length	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(b) Diverse content	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(c) Students have sufficient opportunity to join	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(d) Proper arrangement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(e) Interesting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(f) Bringing sports knowledge to students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. What is the most satisfactory part in the programme?

5. Do you have any comment for improving the programme?

6. Please provide your other comment for this School Sports Programme (Special School)

7. Will you participate in the similar programme(s) in the future?

(a) Yes

(b) No (please specify you reason: _____)

Name of School:

Teacher-in-charge:

Telephone No.:

Thank you for your comment.