

STOUR VALLEY ARTS LTD
EVALUATION FORM

PLEASE RETURN THIS FORM TO STOUR VALLEY ARTS, FOREST OFFICE, BUCK STREET
CHALLOCK, KENT, TN25 4AR.

NAME OF SCHOOL/GROUP _____

ADDRESS _____

CONTACT NUMBER _____

TEACHER/GROUP LEADER NAME _____

DATE OF VISIT _____

AGE OF PARTICIPANTS _____

NUMBER IN THE GROUP _____

1. How did you hear about Stour Valley Arts?

2. How did you prepare for your visit to King's Wood

3. Was the visit related to other topics you are working on? In what ways?

4. Did the event meet your expectations? Was it better or worse? Please be specific

5. Will you do further work related to the visit and to the experience? If so, what will you do?

6. Do you have any suggestions for improving the visit?

(please continue overleaf if necessary)

Please return this form to Lucy Medhurst, Stour Valley Arts, Forest Office, Buck Street
Challock, Kent, TN25 4AR.

Or by e mail: education@stourvalleyarts.org.uk

Thank you for taking the time to complete and return this form. your comments are appreciated