Lifeguard Training Survey 2017

Name (Optional)_____

Your input will help to make our trainings better in the future. Please share your ideas and input to help us be the best that we can be. Thank you in advance for your input! ☺

1. What did you think about the times, dates and training locations that we had training? Do you have suggestions?

2. Please list the part(s) of training that you found MOST helpful?

3. Please list the part(s) of training that you found LEAST helpful?

4. What was your most favorite part of training this year?

5. What was your least favorite part of training this year?

6. What did you learn during training that you did not know?

7. Please list suggestions for future trainings and inservices?

8. Other Comments: