



# STUDENT EVALUATION 09-10 AYP

## PROGRAM END

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Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

Host Family: \_\_\_\_\_ State: \_\_\_\_\_

Local Coordinator: \_\_\_\_\_ Regional Director: \_\_\_\_\_

1. Was the program what you were told it would be?  Yes  No (If "no", please explain)

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

2. Please suggest any changes to the Pre-Departure Orientation or Student Orientation:

\_\_\_\_\_

3. Would you recommend this type of Academic Year Home-stay Program to other students at your school?  Yes  No (If "no", please explain)

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

4. Your Local Coordinator is to meet with you in person each month. Do you feel he/she was available on at least a monthly basis?  Yes  No (If "no", please explain)

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

4. Was the LC helpful in solving problems?  Yes  No (If "no", please explain)

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

5. Was there adequate contact with the main ETC office?  Yes  No (If "no" please explain)

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

6. Please list the activities your LC planned for you (one for each month)

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

7. Which Monthly Activities did you like the best? Why?

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8. Which Monthly Activities did you not enjoy? Why?

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9. If you attended the San Francisco Trip, please tell us what you did/did not like, and what you would recommend we change:

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9. If you attended the New York Trip, please tell us what you did/did not like, and what you would recommend we change:

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10. Please rate your High School experience:

Excellent    Average    Poor

Comments: \_\_\_\_\_

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11. Please rate your home-stay family experience:

Excellent    Average    Poor

Comments: \_\_\_\_\_

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12. What do you like best about the exchange program? \_\_\_\_\_

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13. If there is anything you would change in the exchange program, what would it be?

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14. What activities would you recommend we add to our program next year?

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Additional Comments and Suggestions:

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