

**PORT OF LOS ANGELES
School Boat Tour Program
EVALUATION FORM**

THIS AREA FOR OFFICIAL USE ONLY

Form received on _____

by: mail _____ fax _____ tour co. _____

Please assist us to maintain quality and improve our tours by completing this evaluation as soon as possible after your tour. Your comments will help us make this program the best it can be. Return the form to the address or fax below:

School Boat Tour Coordinator
Port of Los Angeles
P.O. Box 151
San Pedro, CA 90733-0151
fax: (310) 547-4611
email: edtours@portla.org

THANK YOU!

School _____ Instructor _____

Date of tour _____ Time of tour _____

Number of students _____ Number of adults _____

Name of boat _____ Name of Captain _____

Was the boat clean? _____ On schedule? _____

Was the Narration live or taped? _____ Interesting or dull? _____

Was the narration easily understood by your students? _____

Were you pleased with the tour? _____ If not, why? _____

Was the photo check-off sheet effective? _____ If not, why? _____

Were other Port materials helpful in preparation for the tour? _____

Other Comments _____

