Ballet San Angelo
Children's Division / Academy
Parent Feedback Survey

We hate to see you go and hope you will return soon! Would you be so kind as to give us some quick feedback on our work?

Instruction

What class was your child enrolled in? _____

How long has your child participated in BSA classes?

___under a year _____1-3 years _____4+ years

How would you rate the quality of our instruction?

1 2 3 4 5 6 7 8 9 10
Poor Excellent

Do you believe your student was challenged?

1 2 3 4 5 6 7 8 9 10
No, not at all Yes, definitely

How would you rate our payment process?

1 2 3 4 5 6 7 8 9 10
Inefficient/Difficult Highly Efficient/Easy

How would you rate our overall customer service?

1 2 3 4 5 6 7 8 9 10
Poor Excellent

How did you feel the overall class experience/benefit compared with the cost?

1 2 3
Underpriced Just right Overpriced

Were our facilities conducive to learning (specifically accessible, comfortable and clean) ?

1 2 3 4 5 6 7 8 9 10

No, not at all Yes, definitely

Did your student participate in any BSA performances? _____yes _____no

If yes, which ones in the past year? _____

How would you rate the overall performance experience?

1 2 3 4 5 6 7 8 9 10

Poor Excellent

Are you aware of Ballet San Angelo's 501(C)3 arts non-profit status? ____yes _____no

Do you think your student experienced *Empowerment through Movement* (our vision statement) during their time here?

1 2 3 4 5 6 7 8 9 10

No, not at all Yes, definitely

Is there anything more you can share to help us improve our work (attach page, if needed)?

_____

<u>Please share your reasons for leaving – check all that apply</u>

____Too many other activities

____Scheduling conflicts

____Lack of interest

Other – please share _____

Optional - Submitted by:_____

May we contact you if we have further questions? _____yes _____no

What is the best number or email?_____

Thank you so much for taking the time to help us improve our work!