



Participant Survey

Please email completed surveys to programs@tidewaterartsoutreach.org or fax to (757) 965-9211

Date: _____ TAO Program: _____

Location: _____ Your Name (optional): _____

I enjoyed this program This program was meaningful

I enjoyed being with others I feel better physically

I feel happier I feel like I learned something

I would like to do this again

How would you rate the quality of this program? (please circle)

Poor Fair Neutral Good Excellent

Your opinion is very important to us. Please tell us what you thought about this program. How did it make you feel? What did you like or not like. Do you have any suggestions for us?
