



Supplementary Physical Training Program Evaluation

Thank you for participating in the PSP Supplementary Physical Training Program (SPTP). We would appreciate your feedback. Your answers and comments will help with the future planning of this program.

1. Did the SPTP meet your needs?
2. What part(s) of the program were most valuable to you?
3. What part(s) of the program were least valuable to you?
4. If you could add or change something to the program what would it be?
5. Did the program offer a variety of classes to suit your needs? Are there any other activities/classes you would have liked to see offered in the program?
6. How prepared were the PSP Fitness Staff at the beginning of each class?
7. How were the PSP Fitness Staff at providing safety precautions during the classes?
8. Additional Comments: