

Welcome to the Education Program Survey

Instructions: Tell us about your experience today by selecting your choices.

This valuable information will improve future public outreach programs. We appreciate your feedback. Thank you for helping us serve you better.

Numbers are for internal purposes only

OMB Control No. 3095-0070

Expiration date 12/31/2026

1. What location did you visit?

2. What was the date of the field trip?

Select from calendar below:

Date

MM/DD/YYYY



* 3. Please select the name of the program you attended during the field trip.

Select only one

America's Freedom
Train

Art and Architecture
of the National
Archives

Art and Architecture
of the National
Archives-Large Group

Archives Explorer:
Discover Stories in
the National Archives

The Declaration at
250: Symbolizing
Freedom

Make Your Voice
Count

Voices of
Independence

Remember the
Ladies: Women's
Rights from the
Revolution to the ERA

4. Overall, I am satisfied with my students' group program experience today (161)*.

- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree

5. Is this your first time for your students to participate in a field trip program (162)?

- ☐ Yes
- ☐ No

6. How did you learn about the field trip programs?

- ☐ Brochure or flyer
- ☐ Newsletter
- ☐ Promotional signs
- ☐ Teacher Conference
- ☐ Calendar of Events
- ☐ Newspaper
- ☐ Radio or Television
- ☐ Website
- ☐ Magazine
- ☐ Professional publication
- ☐ Social media (Facebook© or Twitter©)
- ☐ Word of mouth or personal recommendation

Other (please specify)

7. The content of the program was presented in an age appropriate manner.

- ☐ Yes
- ☐ No

8. Overall, the program met its stated objective(s) (166).

- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree

9. Will you recommend this program to other educators (167)?

- ☐ Yes
- ☐ No

10. Reason for participating (86):

11. Overall, the facilitator was effective (168).

- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree

12. The audiovisual technologies were fully functioning (164).

- ☐ Yes
- ☐ No

13. The facilities were clean and well maintained (163).

- ☐ Yes
- ☐ No

14. How could this program be improved?

15. Additional Comment(s):

PAPERWORK REDUCTION ACT PUBLIC BURDEN STATEMENT: You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Public burden reporting for this collection of information is estimated to be less than 5 minutes per response. Send comments regarding the burden estimate or any other aspect of the collection of information, including suggestions for reducing this burden, to National Archives and Records Administration (MP), 8601 Adelphi Rd, College Park, MD 20740-6001. DO NOT SEND COMPLETED FORMS TO THIS ADDRESS.

OMB Control No. 3095-0070, expiration date 12/31/2026