



Program Assessment

Each group is unique and we want to provide you with a program to suit your needs. You can help us do this by filling out this assessment as completely as possible and return (via email, if possible) at least 14 days prior to your program. Your lead facilitator will be in touch to follow up on the details of your program.

Organization & Group Name		Program Date and Time	
Group Contact Person and Title			
Email			
Phone Number for Pre-program communication		Phone Number for Last Minute Communication	
Will the contact person be present? <input type="checkbox"/> YES <input type="checkbox"/> NO		When would your group like a break/lunch (if needed)?	
# of Participants Expected		# of Chaperones Expected	
# of Groups		Are groups pre-divided? <input type="checkbox"/> YES <input type="checkbox"/> NO If so, How?	

Background:

Do the participants know each other's names?

How old are the participants?

How often do they meet as a group? How long have they been together?

Who are the participants and what is their relationship to one another?

What has been or will be the nature of their typical group interactions?

What possible group dynamics should our facilitators be aware of? Are there any subgroups within this group?

What group norms, language, or symbols exist? How can we incorporate these things into our programming?

Are there any members of this group that have special needs that we can be aware of in order to create a more inclusive environment?

Are you aware of any participant health issues (including allergies) or physical limitations?

All participants are encouraged to choose how they will participate in each activity. They are not forced to do anything. With that in mind, do these participants have a choice in whether or not they come to this session?

Prior Experience:

Have they done experiential/team-building activities? If so, please describe the experience. AND/OR If you have been a part of an experience like this in the past, what elements of the program would you like us to keep? What would you like to change?

Goals:

What motivated you to plan this program? What does teambuilding mean to you?

What are your goals and expectations for this experience? Include both short and long term as well as individual and group goals.

Does your group have a social contract already in place? If so, please share this common language so we can be consistent and build off of your pre-existing guidelines.

How should we customize a program for your group? What specific program components or activities would you like to be included in your program?

What would make this time a success for you? For your participants?

How will you know if your goals are achieved?

Who are the chaperones and how will they be participating in the day? Be full participants? Participate in the debrief? Sit back and help as needed?

Group Preparation and Follow-up:

Will the program goals/desired outcomes be discussed with the group prior to the program (we recommend this)?

What lead-up activities will you be doing?

What follow-up activities will you be doing?

Location:

Tell us a little about the space we will be working in. If outside is there rain space available?