**Activity Evaluation Form for Students**

**Student Information  
Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Grade/Class: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Instructor’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Activity Information  
Activity Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Date Conducted: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_\_\_  
Activity Duration: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Rate the Following Aspects  
(Please check the most appropriate option)**

| **Evaluation Criteria** | **Excellent** | **Good** | **Average** | **Poor** |
| --- | --- | --- | --- | --- |
| **Activity Content** | **☐** | **☐** | **☐** | **☐** |
| **Engagement Level** | **☐** | **☐** | **☐** | **☐** |
| **Instructor’s Clarity** | **☐** | **☐** | **☐** | **☐** |
| **Use of Materials** | **☐** | **☐** | **☐** | **☐** |
| **Interaction Among Participants** | **☐** | **☐** | **☐** | **☐** |
| **Overall Satisfaction** | **☐** | **☐** | **☐** | **☐** |

**Feedback Section  
What was the most enjoyable part of the activity?**

**What improvements would you suggest for the future?**

**Would you recommend this activity to other students?  
☐ Yes ☐ No**

**Any additional comments:**

**Student’s Signature  
Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_\_\_**