

Buckskin Council

Summer Camp Evaluation

Troop: _____ Date: _____ Week: 1 2 3 4 Camp Site: _____

Please help us make Summer Camp better. Place a mark in the score box (5 is excellent 1 is bad) for the area and give us a comment. We like good as well as bad comments. If you were not involved with an area leave it blank.

Program	Score					Comments
	5	4	3	2	1	
Adventure WV						
Ecology / Conservation						
Handicrafts						
Merit Badge(s) - General						
Scoutcraft / Pioneering						
Shooting Sports: Archery						
Rifle						
Shotgun						
Troop Buckskin						
Water Front						
OA Experience						

Staff & Equipment

Camp Equipment						
Camp Staff						
Check In						
Dinning Services						
Health Services						
Office / Administration						
Trading Post						

Please answer the questions on the back of this page also.

What did your Leadership like Best?

What did your Leadership like least?

What could we do to improve next years Summer Camping experience?

What could we do to improve the Buckskin Reservation?

Additional Comments:

Please turn this form in before the Friday Night Campfire!

Leader: _____ Position: _____