



Hood County Master Gardener Program

Your input is very valuable to the planning committee for the Master Gardener Program. Please take a brief moment of your time to help us make our programs more effective for you. Thanks!

Please check the box for the statement that best describes your level of understanding as a direct result of the Hood County Master Gardener program.

STATEMENTS	LEVEL OF UNDERSTANDING				
	Not at all	Very Little	Fairly Well	Quite Well	Very Well
I gained knowledge of general gardening practices.					
I developed skills in gardening.					
I understand the benefits of gardening.					
I am confident in my ability to practice the gardening techniques taught in the program.					

Please check the box for the statement that best describes your thoughts concerning the Master Gardener program.

STATEMENTS	Strongly Disagree	Disagree	Agree	Strongly Agree
The subject matter was timely for me.				
The speakers were effective.				
The information was practical and suited to my needs.				
The program was interesting.				
I can go home and use the information I learned today in my home garden.				
Overall, this was a very educational program.				

From the total program, which practice(s) will you most likely take home and do/implement?

What other gardening topics would you like further information about that were not addressed?

Please tell us about your gardening preferences!

Where do you live? _____ City _____ Suburbs _____ Country

Do you have a garden at home? _____ Yes _____ No

What kinds of plants do you have in your garden?

Please provide any additional comments in the space below!

********Thanks so much for your time! If we can provide additional assistance to you, please let us know!********