

Iowa Foster and Adoptive Parents Association



2010 Summer Programming Survey

This summer, IFAPA provided a scholarship to your child or children to attend a camp, summer activity or receive a family activity pass. IFAPA is requesting your feedback on your experience with the summer scholarship program. Please complete this survey by Friday, August 6th. Thank you for your participation.

Please list the gender and ages of the children in your home that received scholarships:

Gender	Age

What activity did your child receive funding for? What was the name of the camp/activity? If you have more than one child that received a scholarship, please list all activities/camps below:

"Day camp – Name of camp: _____

"Overnight camp – Name of camp: _____

"Swimming lessons – Name of provider: _____

"Pool pass – Name of city pool: _____

"Family activity pass – Type of family pass: _____

"Other _____

Did your child have a positive experience participating in their camp/activity?

Would your child have participated in this activity if you had not received a scholarship?

""Yes ""No If no, why not?

Would you recommend the camp/activity to others?

""Yes ""No If no, why not?