

ACCOMMODATION EVALUATION

Form: EF - 6 | Revised: 9-Nov-2018

Community: _____

Address: _____

Full Name: _____ Date: _____

Accommodation Type

- Apartment / Duplex / Fourplex / Condo
- House (main / basement)
- Bed & Breakfast
- Room & Board
- Other (please specify): _____

Specify number of bedrooms: _____

Satisfaction Level

Please rate the accommodation by circling the appropriate number on the following scale, where:
1 = Very Poor, 2 = Poor, 3 = Neutral, 4 = Good and 5 = Excellent.

	Poor				Excellent
	1	2	3	4	5
Location	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Size	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Furnishings and Supplies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General Comfort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Suitability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall impression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments

Briefly state the reasons for your rating. Please feel free to recommend anything you feel might improve the accommodation:

Thank you in advance for completing this evaluation form and submitting it to RhPAP via the following address below or Scan & Email to: accommodation@rhpap.ca