



ACCOMMODATION EVALUATION

Form: FF - 6 | Revised: 26-September-2022

Town/City: Date:					
Address of Accommodation:					
Name (optional):					
Satisfaction of experience					
Please rate the following statements by circling/check	ing the appr	opriate nu	mber of the foll	owing scale,	, where:
	1 = Poor	2 = Fair	3 = Unsure/OK	4 = Liked It	5 = Loved It
Receiving Accommodation Information					
Picking up Keys for Accommodation					
Cleanliness of Accommodation					
Supplies – household items/appliances					
Furniture (comfort/condition)					
Exterior Maintenance (snow/lawn)					
Overall Condition of the Accommodation					
Checkout/Key Return Process					
Would you consider a career in this community?					
Would you recommend this community to other learners?					
Rate your learning experience in rural Alberta					
Rate your overall experience staying in the RhPAP accommodation					
Did the RhPAP Accommodation Meet/Exceed yo ☐ Met-Yes ☐ Exceeded-Yes ☐ No Additional suggestions or comments	ur expecta	tions?			
Additional suggestions or comments Do you have any other feedback about your overa (Please feel free to recommend anything you feel might imp					

Thank you in advance for completing this evaluation form and submitting it to RhPAP: accommodation@rhpap.ca