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Graduate's Survey

Last Name:	First Name:	MI:	Class Of:	D.O.B.:
Email:	Full Current Address:	City:	State, Zip Code:	

School Survey

Answer the survey by giving a rating of 1-5. 1 Poor, 2 below average, 3 average, 4 above average 5 Excellent

1. What college(s) or university/universities are you applying to or have applied to?

2. Have you been accepted to any colleges or universities? If so, which one(s)?

3. If you are not planning to attend college/university, what are your future plans after high school graduation?

4. Overall effectiveness of the curriculum:
 1 2 3 4 5
5. Overall rating of instructors:
 1 2 3 4 5
6. Overall rating of administration & staff:
 1 2 3 4 5
7. Overall rating of technical support:
 1 2 3 4 5
8. Overall experience of the school:
 1 2 3 4 5
9. What was your main goal in enrolling in FTA? Did you attain that goal?

10. Would you recommend this school to a family or friend? Why or Why Not?

11. What are some areas you believe are the strengths of the school?

12. What are some areas in which you believe we need to improve?

Student Signature: _____

Date: _____