



Questionnaire

20__/20__

Thank you for your kind support and tremendous effort!
Please tender your comments and recommendations. The
Jump Rope for Heart Program will be improved according to
your feedback!

School information

School name : _____

JRFH coordinating teacher : _____

It is the ____ year we joined the Jump Rope for Heart Program

Jump Off Day information

Date of Jump Off Day : _____

No. of participants at Jump Off Day : _____

No. of students participating in fund raising : _____

Total number of students in school : _____

JRFH materials **Please circle the appropriate number

(1 = totally not useful ; 5 = very useful)

Ropes	1	2	3	4	5
"Heart ambassador" pins	1	2	3	4	5
JRFH User's Guide	1	2	3	4	5
Promotional posters	1	2	3	4	5
Collection pledge	1	2	3	4	5
Skipping skills posters (40 pages)	1	2	3	4	5
Health materials (Health Department)	1	2	3	4	5
Others : (please specify)	1	2	3	4	5

JRFH souvenirs
number

****Please circle the appropriate**

(1 = extremely not popular ; 5 = very popular)

Ball Pen	1	2	3	4	5
Rope	1	2	3	4	5
Rope Bag	1	2	3	4	5
Socks	1	2	3	4	5
Towel	1	2	3	4	5
USB	1	2	3	4	5
Other suggestions (please specify)	1	2	3	4	5

We need your feedback....

Which part(s) / element(s) are most attractive to students?

Which part(s) should be improved? How?

Will students keep on skipping? Why?

Will your school join JRFH again next year? Why?

Has your school formed skipping team / club? What is the response of the team members?

Other comments:
