



# 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

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**JRFH souvenirs**  
**number**

**\*\*Please circle the appropriate**

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

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

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**We need your feedback....**

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

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Which part(s) should be improved? How?

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Will students keep on skipping? Why?

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Will your school join JRFH again next year? Why?

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

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Other comments:

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