

(A)

Date: \_\_\_\_\_

### Planetarium Show Survey

1) Are you a:  Boy or  Girl

2) How old are you? \_\_\_\_\_ years

3) How much do you like Science?

- I don't like it at all
- I don't like it much
- Sometimes I like it, sometimes I don't like it
- I like it
- I like it a lot

4) How much do you like Astronomy?

- I don't like it at all
- I don't like it much
- Sometimes I like it, sometimes I don't like it
- I like it
- I like it a lot

5) How much do you like learning about the Earth?

- I don't like it at all
- I don't like it much
- Sometimes I like it, sometimes I don't like it
- I like it
- I like it a lot

6) How much did you want to see this show?

- Not at all
- Not very much
- Did not care either way
- A little
- A lot

7) How much do you agree with each sentence below?	Strongly Disagree	Disagree	Don't Agree or Disagree	Agree	Strongly Agree
a) I enjoyed this show.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) I learned new things from this show.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) I understood this show.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) I liked the way the show looked.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) I liked the music.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Things in this show were real and not made up.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) This show was a show for kids like me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) I want to see this show again.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) I will tell my friends to come see this show.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>