



PROGRAM EVALUATION FORM

ALOHA!

Kānehūnāmoku Voyaging Academy (KVA) is excited to partner with your child's school this year to provide an exciting, dynamic, hands-on curriculum grounded in traditional Hawaiian voyaging culture.

Our KVA team has worked closely with your child's school to develop a program unique to the needs of each classroom. In this program your child may receive the following services:

1. Classroom curriculum delivered by your child's classroom teacher and/or KVA staff,
2. Field Trips focused on traditional navigational and sailing skills,
3. Field trips to sail on our 29ft double-hulled coastal sailing canoe, Kānehūnāmoku,
4. Virtual learning content delivered by your child's classroom teacher and/or KVA staff.

In this packet you will find the following forms:

Program Evaluation Form: Consent to evaluate and collect data from students.

Accident Waiver and Liability Release Form: Consent to ride on the wa'a.

Media Release Form: Allows KVA to document your child's experience.

KVA Waiver of Liability Relating to Coronavirus/COVID-19: In-person visits only.

We need permission for you and/or your child to participate in an evaluation study of this project. The purpose of this study is to find out how effectively we are able to increase student interest, skills and knowledge in traditional Hawaiian navigation and sailing. We will also collect data on their sense of belonging to Ko'olau and Hawai'i. This evaluation might include 1) demographic data on your child provided below; 2) attendance data; 3) interest and attitudes survey; 4) skills and knowledge tests; 5) focus group interviews.

All data that we collect will be kept confidential. For school year **2023-2024**, data will be shared with funders and community partners. In any other instance, data will only be shared in aggregate, meaning no individual participant information will be shared. However, the law says that the project staff and the evaluation team must report to the authorities when a person lets us know that a child, elderly person, or sick adult has been abused or neglected. We must also report if we believe that you or your child are a serious danger to yourself or to other people.

If you agree to participate in the evaluation of this project, please fill out the information on the next page. If you decide not to participate in the evaluation please fill out the top portion only and check the "no" box. Checking "no" will in no way exclude your child from any part of the program.



If you have any questions please direct them to info@kanehunamoku.org. Mahalo nui loa!

PLEASE FILL OUT IN BLACK OR BLUE INK ONLY

Participant's Full Name: _____

School/Group: _____

Teacher's Name: _____ Grade: _____

- No, I do not want my child or myself to participate in the evaluation of this project.
- Yes! I give consent for my child or myself to participate in the evaluation of this project.
Please fill out the information below

Birth Date _____ Gender: _____

Native Hawaiian: yes / no Zip code: _____

IF MINOR, CUSTODIAL PARENT OR GUARDIAN MUST FILL OUT THIS SECTION:

Parent/Guardian name (printed): _____

Parent/Guardian Signature: _____ Date: _____