

Session Evaluation Survey

About me Years of teaching: _____

I work as a(n):	teacher	administrator	coach	other
Type of school I work in:	elementary	middle	high	other
	charter	magnet	private	public <small>(non-charter)</small>
The area in which I work can be described as:	urban	rural	suburban	other

For items 1-7, please circle the number that best represents your thoughts or check NA if the item is not applicable.

	Strongly Disagree	Disagree	Agree	Strongly Agree	NA
1. My instructor was prepared and organized.	1	2	3	4	<input type="checkbox"/>
2. I was actively engaged and involved during the session.	1	2	3	4	<input type="checkbox"/>
3. The activities and strategies were appropriate and helped me understand, practice, and remember the session content.	1	2	3	4	<input type="checkbox"/>
4. My instructor was knowledgeable.	1	2	3	4	<input type="checkbox"/>
5. My instructor was respectful of people’s ideas.	1	2	3	4	<input type="checkbox"/>
6. I deepened or affirmed my understanding of the content (topic, subject matter, policy, etc.) shared during this presentation.	1	2	3	4	<input type="checkbox"/>
7. My instructor provided practical strategies for implementation.	1	2	3	4	<input type="checkbox"/>
8. I will use this/share this in my school or district.	1	2	3	4	<input type="checkbox"/>
9. I would recommend this session to colleagues.	1	2	3	4	<input type="checkbox"/>

For items 10 and 11, please respond briefly in the space provided.

10. Why did you select this session? _____

11. Please list the greatest strengths of this session. _____

12. Please list suggestions for improvement of this session. _____

