

Name: _____ Building: _____ Date: _____

Prof. Dev. Focus: _____ Facilitator: _____

As a result of my participation in this workshop I am going to

How well did the workshop cover the stated outcomes?

Was the workshop practical?
Not at all 1 2 3 4 5 *Extremely Well*

Are you going to use this information?
Not at all 1 2 3 4 5 *Extremely Well*

Will this influence student achievement?
Not at all 1 2 3 4 5 *Extremely Well*

I am a:

- Administrator
- Teacher
- Parent
- Paraprofessional
- Other

Three things I learned that made me go . . .
AH HA!!

1. _____

2. _____

3. _____

I am affiliated with a(n):

- Elementary School
- Secondary School
- District
- Other

What specific additional support, if any, do you need to better understand or implement these concepts?