(Insert name of program) PROGRAM TEACHER EVALUATION

Teacher's Name: _____ School: _____

1. Was the ***(insert name of program)*** program at a time of the school year in which school study coincides? Why or why not?

_____

_____

2. How would you rate the teacher's guide, resource materials, and student activity books?

1	2	3	4	5
Poor	Fair	Neutral	Good	Excellent

Please explain your rating. _____

_____

3. How would you rate the ***(insert name of program)*** fieldtrip, which was done on(insert date)?

1	2	3	4	5
Poor	Fair	Neutral	Good	Excellent

Please explain your rating. _____

_____

4. How would you rate the overall ***(insert name of program)*** program this year?

1	2	3	4	5
Poor	Fair	Neutral	Good	Excellent

Please explain your rating. _____

_____

5. What suggestions do you have to help us improve on the ***(insert name of program)*** program?

_____

_____

_____

Thanks! Your feedback is appreciated!