

Incursion Evaluation

Return to ella@chooktopia.com.au

TEACHER EVALUATION FORM

School /	Grade/Year Level/ Group name: Session date: Number of students that attended:						
Kinder name:							
Incursion topic:							
Chooktopia Educator name:							
About the session		Please	circle:				
Session length was appropriate:		Yes /	No				
Session was age / curriculum appropriate:		Yes /	No				
Would you recommend this incursion to other schools		Yes /	No				
	Exceeded expectations	Met expectations		Did ı	Did not meet expectations		
The session content							
Student involvement							
The session overall							
THE EDUCATOR:		Strongly	Agree	Neutral	Disagree	Strongly	
		agree				disagree	
Encouraged participation							
Was well organised and prepa	 red						
Responded to participant nee	ds						
Facilitated the session adequa	+al.		<u> </u>				
Facilitated the session adequa	tery						
Offered reasonable time for g	roup activities/discussion		-				
Demonstrated good knowledge of the content for the			1			<u> </u>	
session							
Best thing about the session:							
What could improve the session	າ?:						
A (- - - - - - - - - -							
What will you change/impleme	nt as a result of this session?						
Other comments/feedback:							
		If v	ou prefer	, fill in this	[
			aluation o]	3,89 0	
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