Reflection Form

Fill this form out during Homeroom if you have participated in the Lunchroom activity. Participation is optional.

* Required

Which period do you have lunch? *

Period 7

Period 9

Period 11

Period 13

Did you participate in the activity? *

Yes

No

(For students who answer “no” the survey will end.)

What did you enjoy about this activity? *

Your answer

Rate your experience with this activity? (1-10) *

Can be improved

2

3

4

5

6

7

8

9

10

Excellent

In the future, how can we improve this activity? *

Your answer

Do you feel like this activity strengthened your communication skills? Explain why (1-2 sentences) *

Your answer

Given the chance, would you participate in an activity similar to this again? *

YES! I enjoyed this activity

No, it can be heavily improved on

I enjoyed it, but it was not for me.