**Auburn School District #408**

# Program Evaluation Form Summary

**Title of In-service:** Math Content Meetings **Date(s):**
**Location:** JPF **Varies**

**Type of In-service**:
☐ Building-Determined 21 Hours ☐ Optional Day
☐ LID ☐ Waiver Day
Other ___x_OPTIONAL_____

**Your Position:**
☐ Teacher (check one): ☐ Central Administrator
☐ Elementary ☐ Building Administrator
☐ Middle School
☐ High School ☐ Specialist
☐ Other _____

***Total Number of Responses:*** 11

**Indicate your agreement with each of the following statements by circling the appropriate number.**

| | Strongly Agree | Somewhat Agree | Undecided | Somewhat Disagree | Strongly Disagree | Not Applicable |
|---|---|---|---|---|---|---|
| 1. The course met the stated objectives. | 9 | 2 | | | | |
| 2. The activities related to and supported the stated objectives. | 8 | 3 | | | | |
| 3. The instructor(s) skillfully presented the material and was responsive to the audience. | 11 | | | | | |
| 4. The instructor(s) was well prepared. | 11 | | | | | |
| 5. The instructor(s) was well qualified and knowledgeable. | 11 | | | | | |
| 6. The materials provided were useful for improving instruction. | 9 | 2 | | | | |
| 7. The written and/or electronic materials were relevant and of high quality. | 9 | 2 | | | | |
| 8. The information was applicable and relevant to improving student learning. | 10 | 1 | | | | |
| 9. The information presented is easily applied to the classroom. | 6 | 5 | | | | |
| 10. The presentation included strategies that met the needs of diverse learners. | 9 | 1 | 1 | | | |
| 11. The overall program was excellent. | 10 | 1 | | | | |

What specific information was of greatest value to you?

Please provide any necessary feedback that would improve this in-service offering *if repeated*

☐ Improve Facilities Modify activities for greater interaction ☐ Enhance presentation skills

☐ Increase pacing Provide greater time for Questioning/Applicable practice ☐ Information needs greater depth of knowledge

☐ Align better with District or Building strategic plan ☐ Other _____

***Thank you for your feedback!***