

COMMON FEEDBACK FORM C MULTI-DAY SESSION - WRAP-UP

Session Title: _____				
Session Dates: _____				
Presenters: _____				
Series Focus: _____				
	Strongly Agree	Agree	Disagree	Strongly Disagree
Professional Practice:				
1. There was a close connection between each session in this series. (E.g., day 1, day 2, day 3).				
2. I collected evidence as part of the professional learning.				
3. a) I found the collection of evidence useful .				
b) What type of evidence did you collect?				
4. Throughout the professional learning, there were opportunities to collaborate .				
5. I had an opportunity to work with an Observation Chart as part of my professional learning (Mid-Point Self-Observation Chart)				
6. a) As a result of the professional learning, my teaching/instruction has changed .				
b) If your teaching changed, how did it change?				
7. a) As a result of the professional learning, I observed a change in student learning/achievement .				
b) If you observed a change in student learning/achievement, how did it change?				
8. My professional learning could be improved with the following next steps:				
<ul style="list-style-type: none"> • Support with implementation explain: _____ • Additional materials - explain: _____ • Additional information - explain: _____ 				
9. Do you have any additional comments (or, question specific to the professional learning)				