

Instructional Support Services Evaluation Form

Date: 5/31/18

Facilitator(s): Tessa LeVitt / Sarah Whitmeyer

Event: Culminating Leaders 4/4

District/School: Genesee Valley Central School

This survey will help us evaluate how well this learning experience has met your needs and expectations. Please respond to all the items by circling the number that best represents your opinion for each item below.

	Strongly Disagree	Disagree	Not Certain	Agree	Strongly Agree
1. The workshop clearly addressed the stated outcomes.	1	2	3	4	(5)
2. The information presented was meaningful to me.	1	2	3	4	(5)
3. The facilitator promoted a positive learning environment.	1	2	3	4	(6)
4. The workshop will impact how I work to improve student learning.	1	2	3	4	(5)
5. I would recommend this learning opportunity.	1	2	3	4	(5)

Please comment:

I thoroughly enjoyed this training and felt that all sessions had elements that I could immediately apply to my current role. I would highly suggest repeating this for other teacher leaders next year or five year after.

<p>I expected:</p> <p>Tools and strategies to utilize in my current role to become a more efficient leader.</p>	<p>I received:</p> <p>Exactly that!</p> <p>I loved the resources provided surrounding the PIRATE series and crucial conversations/confrontations</p>
<p>After this workshop I plan to:</p>	
<p>I still need:</p>	<p>Comments:</p> <p>All the strategies provided were relevant and have been very helpful this year as I entered a leadership role - Thank you!</p>

Instructional Support Services Evaluation Form

Date: 5/31/18

Facilitator(s): Sara & Tessa

Event: CLC Teacher Leadership Day 21

District/School: Salamance City Central

This survey will help us evaluate how well this learning experience has met your needs and expectations. Please respond to all the items by circling the number that best represents your opinion for each item below.

	Strongly Disagree	Disagree	Not Certain	Agree	Strongly Agree
1. The workshop clearly addressed the stated outcomes.	1	2	3	4	5
2. The information presented was meaningful to me.	1	2	3	4	5
3. The facilitator promoted a positive learning environment.	1	2	3	4	5
4. The workshop will impact how I work to improve student learning.	1	2	3	4	5
5. I would recommend this learning opportunity.	1	2	3	4	5

Please comment:

Numbers learning opportunities throughout the year.
Would like another type of learning conference
for the 2018-19 school year.
Thanks for all the resources!

I expected:

I received:

After this workshop I plan to:

I still need:

Comments:

Instructional Support Services Evaluation Form

Date: 5/31/18

Facilitator(s): Tessa Leitch, Sarah Wilmayer

Event: Alhambra Teacher Leaders

District/School: Salamanca CCSD

This survey will help us evaluate how well this learning experience has met your needs and expectations. Please respond to all the items by circling the number that best represents your opinion for each item below.

- | | Strongly Disagree | Disagree | Not Certain | Agree | Strongly Agree |
|---|-------------------|----------|-------------|-------|----------------|
| 1. The workshop clearly addressed the stated outcomes. | 1 | 2 | 3 | 4 | 5 |
| 2. The information presented was meaningful to me. | 1 | 2 | 3 | 4 | 5 |
| 3. The facilitator promoted a positive learning environment. | 1 | 2 | 3 | 4 | 5 |
| 4. The workshop will impact how I work to improve student learning. | 1 | 2 | 3 | 4 | 5 |
| 5. I would recommend this learning opportunity. | 1 | 2 | 3 | 4 | 5 |

Please comment:

I have learned a lot from the workshop and have already begun to put it into practice. I would recommend this to all of my peers.

I expected:

To discover ways for supporting
and becoming a teacher in my
school.

I received:

I received ways for providing
the teaching and instructions
to find within my school.

After this workshop I plan to:

Revamp the way I present most of
my lessons and be more confident
assessing within my school and within
my colleagues.

I still need:

Comments:

This was a great
workshop and I have
learned a lot of things.

Instructional Support Services Evaluation Form

Date: 5/31/18

Facilitator(s): _____

Event: Cult. T. Leaders #4

District/School: Scio

This survey will help us evaluate how well this learning experience has met your needs and expectations. Please respond to all the items by circling the number that best represents your opinion for each item below.

	Strongly Disagree	Disagree	Not Certain	Agree	Strongly Agree
1. The workshop clearly addressed the stated outcomes.	1	2	3	4	<u>5</u>
2. The information presented was meaningful to me.	1	2	3	4	<u>5</u>
3. The facilitator promoted a positive learning environment.	1	2	3	4	<u>5</u>
4. The workshop will impact how I work to improve student learning.	1	2	3	4	<u>5</u>
5. I would recommend this learning opportunity.	1	2	3	4	<u>5</u>

Please comment:

Cult. T. wait to read Tech like a pirate.

Thank you!

I expected:

I received:

After this workshop I plan to:

I still need:

Comments: