

CA BOCES Evaluation Summary Form
Regional Professional Development

Use this form as a cover sheet for participant evaluations at the end of each regional professional development event. This form should serve as a summary of participant evaluations.

Satisfaction:

1. To what extent did the participants indicate you addressed the stated outcomes?	1	2	3	4	5
2. To what extent was the information meaningful to the participants?	1	2	3	4	5
3. To what extent did the participants indicate you promoted a positive learning environment?	1	2	3	4	5
4. To what extent did the participants predict it would impact student learning?	1	2	3	4	5
5. To what extent did the participants say they would recommend this learning opportunity?	1	2	3	4	5

Learning:

What were some of the major comments and takeaways from participants regarding what they learned?

- Excellent collaboration.
- ~~Very~~ helpful for what trying to do in classroom.
- Best training they have been to.

What did participants indicate they still need to support further learning or application of their learning?

- Time to create the curriculum.
- Time to work on lessons

What did the participants indicate they plan to do as a result of their learning?

~~Time to create the curriculum.~~

- Incorporate this in their classroom.
- Work on changing lessons.

Instructional Support Services Evaluation Form

Date: 1/30/2020

Facilitator(s): Clay + Lance

Event: ES+Physics AYSSLS

District/School: Belfast

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:

Wonderful! Thank you for the work time!

I expected:

I received:

After this workshop I plan to:

I still need:

Comments:

Instructional Support Services Evaluation Form

Date: 1/30

Facilitator(s): Clay & Lance

Event: NYSLLS training
CLC

District/School: CLV

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 expected:

I received:

After this workshop I plan to:

I still need:

Comments:

Instructional Support Services Evaluation Form

Date: 1-30-20

Facilitator(s): CLAY / LANCE

Event: EARTH / PHYSICS CLC

District/School: HINSDALE

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:

GOOD DAY TODAY!

I expected:

I received:

After this workshop I plan to:

CONTINUE TO GET AWAY
FROM "OLD SCHOOL" METHODS
AND FOSTER STUDENT INQUIRY
AND REASONING

I still need:

Comments:

Instructional Support Services Evaluation Form

Date: 1/30/20

Facilitator(s): _____

Event: CLC

District/School: Olean

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.

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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 always love the training here. I learned
much today.

I expected:

to learn new
ways to present
lessons

I received:

Ideas of
how to improve my
teaching

After this workshop I plan to:

Work on changing
my lessons.

I still need:

Time
to work on
my lessons

Comments:

Great
Day!!!

Instructional Support Services Evaluation Form

Date: Jan 30

Facilitator(s): Clay & Lance

Event: CLC Earth Sci

District/School: Catt Little Valley

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:

Very helpful for what we are trying to do in the
classroom

I expected:

I received:

After this workshop I plan to:

I still need:

Comments:

Instructional Support Services Evaluation Form

Date: 1/30/20

Facilitator(s): Clay/Lance

Event: CLC Earth Science

District/School: Hinsdale

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
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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:

This was the best training I have been to so far

I expected:

more knowledge

I received:

excellent collaboration

After this workshop I plan to:

incorporate this in my
classroom

I still need:

time to
create the curriculum

Comments: