MATH OR SCIENCE WORKSHOP EVALUATION

1. Position (choose any boxes that are appropriate; multiple roles and grades are okay) □ Other
   □ Classroom Teacher  □ Special Education  □ Administrator  □ Resource  □ Gifted
   □ PS  □ K  □ 1  □ 2  □ 3  □ 4  □ 5
   □ 6  □ 7  □ 8  □ 9  □ 10  □ 11  □ 12

2. Reason for taking course: (choose one) □ Required  □ Recommended  □ Personal Choice  □ Other

3. Years I have been teaching: □ 0  □ 1-4  □ 5-10  □ 11-15  □ 16-20  □ 20+
   Strongly Disagree  Disagree  Agree  Strongly Agree

4. I would recommend this course to other teachers.
   □

5. The instructor(s) encouraged participation, questioning, discussion, and independent exploration.
   □

6. This workshop enhanced my understanding and appreciation of mathematics or science.
   □

7. Which textbook/series do you use? ________________________________________________________________

8. The Center is interested in your thoughts on the content of the course, the instructor’s ability to facilitate learning, and insights you have on your own learning.

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