



# PROJECT LEARNING TREE® PARTICIPANT SURVEY FORM

Thank you for your interest in Project Learning Tree. Your comments are essential to ensuring Project Learning Tree programs and materials are as useful as possible for all educators. We never sell or give your contact information to any third party.

## Workshop Information: Please use a pen

Workshop Date: \_\_\_\_\_

Workshop Location: \_\_\_\_\_

Workshop Facilitators: \_\_\_\_\_

### Workshop Type (circle all that apply)

- |            |                        |                 |
|------------|------------------------|-----------------|
| PreK-8     | Secondary              | Fire            |
| PreK-12    | Energy & Society       | Early Childhood |
| Preservice | Other (Specify): _____ |                 |

## Participant Information:

Name: \_\_\_\_\_

Permanent Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Check box if you would like to receive PLT updates and notification of new editions of the *Branch*, PLT's quarterly on-line newsletter.

School/Organization: \_\_\_\_\_

Circle all that apply:

1. My position is:  Preschool Teacher     Elementary Teacher     Middle School Teacher     Preservice or University Student  
 High School Teacher     Nonformal Educator     Homeschool Educator     Resource Professional  
 Administrator     Scout Leader     Other (Specify) \_\_\_\_\_

2. Years teaching: \_\_\_\_\_ Number of students reached/year: \_\_\_\_\_ Student Demographics:  Urban     Suburban     Rural

3. In what subjects will you use PLT?  Arts     Language Arts     Math     Physical Education     Reading     Science  
 Social Studies     Special Education     Other (Specify) \_\_\_\_\_

4. How often do you think you will use PLT activities?  Weekly     Monthly     Several times a year  
 Other (Specify) \_\_\_\_\_

## Workshop Evaluation:

- |   |            |   |                   |           |
|---|------------|---|-------------------|-----------|
|   | ⊗ Disagree |   |                   | Agree ☺   |
| A. The information, strategies, and instructional methods shared were helpful to you. | 1          | 2 | 3                 | 4 5       |
| B. The workshop prepared you to use the PLT materials with your audience.             | 1          | 2 | 3                 | 4 5       |
| C. PLT materials will help you address state academic standards.                      | 1          | 2 | 3                 | 4 5       |
|   |            |   | Needs Improvement | Excellent |
| D. The facilitators for this workshop were:   | 1          | 2 | 3                 | 4 5       |
| E. Overall this workshop was:   | 1          | 2 | 3                 | 4 5       |
| F. The greatest value of the workshop for use with your audience was:                 |            |   |                   |           |

G. How could the workshop be improved?

I. Additional Comments:

Check box if you are interested in becoming a PLT facilitator