PROFESSIONAL LEARNING EVALUATION

Hart County Charter System

Name:		
School:		
Name of Activity:		
Dates Attended:		

Please evaluate the professional learning activity in which you participated. Give a brief description of the activity, identify ways of improving the activity, and state how the activity fits into your school's improvement plan. Use back, if necessary.

Each participant in this professional learning activity should evaluate the QUALITY of the activity by checking whether he/she strongly agrees, agrees, is undecided, disagrees, or strongly disagrees with each of the statements below. (SA-Strongly Agrees) (A-Agrees) (U-Undecided) (D-Disagrees) (SD-Strongly Disagrees)

SA	Α	U	D	SD	
					1. The activity objectives were related to my educational concerns.
					The activity objectives were related to practical educational application in my job.
					The activity had some outstanding components, which were unique or innovative.
					4. Presentations were well organized.
					5. The program schedule was well adapted to my educational needs.
					6. Meeting facilities were suitable.
					7. The strategies utilized, including instructional resources, were appropriate for meeting the stated objectives.
					8. Overall, personnel conducting the activity exhibited the qualities essential to the success of the workshop. (Consider creativity, specialized knowledge, communication skills, etc)
					9. Overall, the activity was a successful training experience for me.
					10. Adequate provisions were made for me to provide feedback to the personnel conducting the workshop.
					11. Adequate provisions were made for me to identify needs which were not previously identified.
					12. As a result of this professional learning experience, I have learned new skills, techniques, strategies, knowledge, etc. that can be implemented immediately in my current position.