

## Professional Development Survey for Educators and School Leaders PDE-3527

Check one: Educator  School Leader

Please respond to each item by circling the number which best describes your opinion (5=excellent; 1=poor).

	<u>Excellent</u>	<u>Average</u>	<u>Poor</u>		
<b>A. Participant Satisfaction</b>					
1. Course/Activity was well organized.	5	4	3	2	1
2. Course/Activity objectives were clearly stated	5	4	3	2	1
3. Course/Activity assignments were relevant to Course/Activity objectives.	5	4	3	2	1
4. All necessary materials/equipment/resources were provided or made readily available	5	4	3	2	1
5. Overall instructor performance.	5	4	3	2	1
<b>B. Impact on Professional Practice</b>					
1. This activity enhanced the educator's/school leader's content knowledge in the area of certification.	5	4	3	2	1
2. This activity increased the educator's/school's teaching skills based on research of effective practice.	5	4	3	2	1
3. This activity provided information on a variety of assessment skills.	5	4	3	2	1
4. This activity provided skills needed to analyze and use data in decision making for instruction or at all levels of the school system.	5	4	3	2	1
5. This activity empowered participants to work effectively with parents and community partners to engage other to pursue excellence in learning.	5	4	3	2	1
6. This activity provided the participants the knowledge and skills to think strategically and understand standards-based school reform.	5	4	3	2	1
7. This activity enhanced the participant's professional growth and deepened your reflection and self-assessment of exemplary practices.	5	4	3	2	1

**C. Comments**

Please take a few moments to respond to the following questions. Your answers will greatly assist us in determining how to improve in-service course offerings.

1. How did this workshop relate to your job, and in what way(s) has it caused you to review your job or training activities?

---

---

---

---

---

---

2. What new ideas have you gained and how do you plan to implement these new ideas in your job or training capacity?

---

---

---

---

---

---

3. What information was of great value to you?

---

---

---

---

---

---

4. What specific suggestions do you have to improve this activity?

---

---

---

---

---

---

5. Additional comments.

---

---

---

---

---

---