



SCHUYLKILL IU 29

Professional Development Survey for Educators and School Leaders PDE-3527

Title of Activity: _____

Dates: _____

Instructor(s): _____

Check one: Educator School Leader

Please respond to each item by checking the number which best describes your opinion. (5 = excellent: 1 = Poor).

A. <u>Participant Satisfaction</u>	<u>Excellent</u>	<u>Average</u>	<u>Poor</u>		
1. Course/Activity was well organized.	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
2. Course/Activity objectives were clearly stated.	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
3. Course/Activity and assignments were relevant to Course/Activity objectives.	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
4. All necessary materials/equipment/resources were provided or made readily available.	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
5. Overall instructor performance.	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>

B. <u>Impact on Professional Practice</u>	<u>Excellent</u>	<u>Average</u>	<u>Poor</u>		
1. This activity enhanced the educator's/school leader's content knowledge in the area of certification.	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
2. This activity increased the educator's/school leader's teaching skills based on research of effective practice.	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
3. This activity provided information on a variety of assessment skills.	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
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 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
5. This activity empowered participants to work effectively with parents and community partners to engage others to pursue excellence in learning.	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
6. This activity provided the participants the knowledge and skills to think strategically and understand standards-based school reform.	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
7. This activity enhanced the participants' professional growth and deepened your reflection and self assessment of exemplary practices.	5 <input type="checkbox"/>	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>

(Over)

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: