LESSON PLAN EVALUATION FORM

Curriculum (circle):   Introductory       Advanced

Lesson Plan #:                      Date:

Setting:                                 # of participants:

______________________________________________________________________________

Please respond to the following questions regarding the lesson plan you just taught by using the scale below. Your honest feedback is appreciated. We will be incorporating your feedback into updates and changes in the lesson plans.

You are required to answer each question. If a short answer form question does not apply to you please write N/A.

N/A       Not so Good       Needs Improvement       Okay       Very Good       Excellent
          0                 1                                  2                            3                     4                           5

1.) How well did the lesson plan address learning objective 1? _______

2.) How well did the lesson plan address learning objective 2? _______

3.) How well did the lesson plan address learning objective 3? _______

4.) How would you rate the overall readability of the lesson plan? _______

5.) How user-friendly do you find this lesson plan? _______

6.) How would you rate the content? _______

7.) How well did the photograph pictures serve as a learning tool? _______

8.) How well did the videos serve as a learning tool? _______

9.) How confident or comfortable were you in presenting this lesson plan?

10.) Was this lesson an effective teaching tool? (circle one):       YES       NO
11.) Was there an unexpected teachable moment or outcome that came up during the lesson? If so, please explain.
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

12.) Did the lesson plan generate uncomfortable or emotional reactions from the students/clients? If so, please explain.
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

13.) What would you change to the lesson plan?
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

14.) What worked well in the lesson plan?
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

15.) Any other feedback or suggestions to improve this lesson?
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________