

EVALUATION

Georgia Charter System Governance Workshop for Local School Councils

Your Name (optional):				Email (optional):										
Role:	Administ	rator	Te	acher	cher Parent Community Me					nber Other			ner	
Knowledge Transfer Metric: Rate your knowledge of charter system governance.														
Place the letter " B " on the scale where you would rate your level of knowledge B EFORE the workshop. Place the letter " A " on the scale where you would rate your level of knowledge A FTER the workshop.														
1 Low	2	3	4	5	6	7	8	9	10	High	า			
For each of agreement appropriate	t or disa	greem						•	ur	Strongly Agree	Agree	Disagree	Strongly Disagree	
The content of the workshop was useful to me.														
2. The style of presentation was appropriate for the topic and setting.														
3. The facilitator met my expectations for the session.														
Comments: Please provide specific feedback about the presenter.														
Identify TWO 'take aways' from this workshop of highly probable use to you. 1.														
2.														
List other	List other areas of training that would benefit you or the team as a whole.													