TTQ Teen Facilitator Evaluation

General Information

1. **AHEC** _____

2. Course Date (mm/dd/yyyy) _____
Start date

3. Course Number (if applicable) _____
Start Date

4. Facilitator _____

Course Information

5. Total Number of Participants _____

6. How many participants did you have at the *start* of the course? _____

7. How many participants did you have at the *end* of the course? _____

8. Where was the course held? _____

9. How long was the class (in minutes)? _____

10. How many sessions was the course broken up into? _____

11. Using the scoring scale below, mark the appropriate rating for each statement on the outcome of this course.

	1 - Low	2	3 - Moderate	4
Class Engagement	○	○	○	○
Participation Level	○	○	○	○

Open Ended Questions

12. What went well during the course?

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13. What improvements could be made?

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Comments/Notes

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