Project Learning Tree - evaluation

Date: _____

Location: _____

Please circle your response to the following statements

1. **"I feel prepared to use PLT with my students."**
   Completely Agree   Agree   Neutral   Disagree   Completely Disagree

2. **"I plan to use PLT with my students in within the next 6 months."**
   Completely Agree   Agree   Neutral   Disagree   Completely Disagree

3. **"I would recommend this professional development event to a colleague."**
   Completely Agree   Agree   Neutral   Disagree   Completely Disagree

4. **"I feel more confident in incorporating topics about the environment into your teaching or training after this PD event."**
   Completely Agree   Agree   Neutral   Disagree   Completely Disagree

Comments: _____

_____

_____

_____

_____

Participant Types (select one)

___ Natural Resource Professional

___ Early Childhood Educator

___ Formal K-12 Educator

___ School Administrator

___ Nonformal Educator

___ College Faculty Developing Perservice Courses

___ College Faculty General

___ College Preservice Students

___ Guidance and Career Counselors

___ NAAEE Affiliate Leader

___ Other

Communities Reached by Participants (select all that you reach)
___ Urban   ___ Rural   ___ Suburban

Title 1 School Educators   ___ Yes   ___ No