Learning Kit Response Form

Your opinion counts! In order to continue to receive this free service, we ask that you please take a moment to fill out this evaluation form and return it in the kit (with the contents checklist completed) on or before the day that it is due.

1. Name: _____________________ Return Date: ________________

2. Kit name: __________________

3. How many teachers and student(s) used the kit (total number in contact with the materials)? Teachers ______ Students ______

4. As a teacher, did you find the materials in the kit to be useful? If so, which item(s) was most useful?
___________________________________________________________________
___________________________________________________________________

5. Which feature(s) need to be improved?
___________________________________________________________________
___________________________________________________________________

6. What would you like to see added/removed from the kit?
___________________________________________________________________
___________________________________________________________________

7. What did the students enjoy the most?
___________________________________________________________________
___________________________________________________________________

8. Additional comments:
___________________________________________________________________
___________________________________________________________________

Thank you for your time. If you have any questions or concerns, please feel free to email us or call the Hotline at 403-527-5365.

Praxis is proud to be a founding member of ASLA