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| --- | --- |
|  | DATE:  SCHOOL:  TEACHER: |

**TEACHER EVALUATION**

**4-H Embryology and Incubation in the Classroom Program**

Please assist us in continuing to be able to provide you with quality programs by completing this evaluating (**both sides**). Please indicate how you used this live experience to supplement the classroom teaching.

1. Did you use the Pre- and Post-test with your class?  Yes  No

If yes, how did the students’ performance change from pre- to post-test?

1. Did this program help to meet the educational goals you have for your students?

 Yes  No

If no, how can the program be improved to meet your goals?

If yes, how did you use the embryology and incubation program in your classroom? Please be specific.

1. Which activities did you use?

1. Please identify any strong points in the program

1. Please identify any weak points in the program

1. Do you have any specific suggestions for improving the program?

1. How many eggs hatched? Were you able to explain/identify why some did not hatch? If so, what was the problem?

1. How would you rate the program for an overall evaluation with 1 being low and 10 being high?

1 2 3 4 5 6 7 8 9 10

**THANK YOU FOR YOUR HELP!**