

2007-2008

VISION Home and Community Program Compiled Educator Feedback

Educator Name: Jason Gressman Class or Subject: Outdoor Skills

- 1) What was the intended purpose for taking the class? Credit, exposure, other?
Credit: x Exposure: x Other: Learn more about survival skills, fun and socialization
Comment:
- 2) Did the class satisfy your purpose and prepare you for the next step in your education?
Yes: x No: _____ Comment:
- 3) What was the teaching style of the Educator? Was this compatible with your preferred learning style? Teaching Style: hands on
Compatible : Yes: x No: _____
Comments: Jason's classes were very interesting and fun.
- 4) Were the objectives of the course clearly defined at the beginning of the class?
Yes: x No: _____
Comments:
- 5) Did the Educator treat you and others in the class with respect?
Yes: x No: _____
Comments: I hope to be in more of Jason's classes in the future
- 6) Did the Educator hold your interest and keep you actively involved in the class?
Yes: x No: _____
Comments:
- 7) Would you take another class from this Educator?
Yes: x No: _____
- 8) If you had a concern with this Educator, did you share it with the Educator?
Yes: _____ No: _____ No Concerns: x

Total Number of Responses: 3

