DO-IT Summer Study Daily Evaluation Form, Delivered via Email

Day [number], [date]

1. On a scale from 1 through 5 where 1 means “poor” and 5 means “excellent,” type the number that reflects your opinion about the quality of the [title] session with [instructor].

2. On a scale from 1 through 5 where 1 means “poor” and 5 means “excellent,” type the number that reflects your opinion about the quality of the [title] session with [instructor].

3. On a scale from 1 through 5 where 1 means “poor” and 5 means “excellent,” type the number that reflects your opinion about the quality of the [title] session with [instructor].

4. On a scale from 1 through 5 where 1 means “poor” and 5 means “excellent,” type the number that reflects your opinion about the quality of the [title] session with [instructor].

5. On a scale from 1 through 5 where 1 means “poor” and 5 means “excellent,” type the number that reflects your opinion about the quality of the [title] session with [instructor].

6. What did you like best about these activities?

7. What suggestions, if any, do you have for improving any of these activities?

Thank you for your participation.