This form is accessible for online entry http://ald4all.org/eval/ or in PDF format at *http://ald4all.org/eval.pdf*

PROFESSIONAL LEARNING FEEDBACK FORM   Date: _____

THANK YOU for taking the time to fill out this *professional learning* feedback form. It is part of a professional, ongoing evaluation process being conducted by the **New Mexico Public Education Department (PED), Bilingual Multicultural Education Bureau (BMEB)**. You may use this form to provide feedback for a workshop or an entire training series. Although pertinent staff may view individual responses, this form is anonymous, and your name/identity is NOT requested and will NOT be included in any reports.

INSTRUCTIONS. Below are several questions designed to help you express your feedback on the effectiveness of the project professional learning session or series. Each question is based on a scale of 0 to 10, with 0 being *Not at All* and 10 being *Totally*. Please choose the number for each item that makes the most sense to you, or leave an item blank if it does not apply to you or to your role in an education system.

ASSENT. Filling in the form below affirms that you are over 18 years of age and that you consent to have your group-level responses to this questionnaire included in related departmental processes and reports.

Professional Learning Content	NOT AT ALL				SOMEWHAT				TOTALLY		
1. The content was appropriate and relevant to the stated/anticipated objective(s) or purpose.	0	1	2	3	4	5	6	7	8	9	10
2. The content was organized in an understandable and meaningful way.	0	1	2	3	4	5	6	7	8	9	10
3. The content will be helpful to me in my role as an educator, stakeholder, or advocate of diverse students.	0	1	2	3	4	5	6	7	8	9	10
4. The content was stimulating and motivating, and will potentially help me to improve how I teach or work with diverse students, families, and/or education stakeholders.	0	1	2	3	4	5	6	7	8	9	10
5. I am confident that I can take this content and use it to raise the my level of activity, advocacy, understanding, or quality of performance in the service of diverse students.	0	1	2	3	4	5	6	7	8	9	10

Professional Learning Process	NOT AT ALL				SOMEWHAT				TOTALLY		
6. The facilitator(s) used appropriate activities, strategies, or methods to make the content more interesting and engaging.	0	1	2	3	4	5	6	7	8	9	10
7. The facilitator(s) ensured that I was an active learner and participant in the process.	0	1	2	3	4	5	6	7	8	9	10
8. The sessions utilized appropriate and helpful materials, visuals, and/or artifacts.	0	1	2	3	4	5	6	7	8	9	10

9. Comments:

10. Suggestions:

11. **Workshop or training series title**:

12. **Facilitator(s):**

13. School Name: **14. District Name:**

Thank you very much for your feedback. Good luck with all that you do!