Program/Teacher Evaluation Form
Amy Medlin

Date_____ Grade_____School_____Teacher_____

Program:

- ☐ **Domestic Violence**
- ☐ **Dating Violence**
- ☐ **Kids for Kindness**
- ☐ **Sexual Assault**
- ☐ **Sexual Harassment**

Rating Scale	4(Excellent)	3(Good)	2(Average)	1(Poor)
1. Please rate the overall presentation.				
2. This presentation was informative and useful for the students.				
3. The program was presented in an organized manner.				
4. The program increased the students' awareness of the effects of victimization.				
5. The program increased the students' knowledge of preventative measures.				
6. This program increased the students' knowledge of available resources if they were victimized.				
7. The presenter was knowledgeable about the topic.				
8. The presenter related well to the students.				

Would you request this program again? ____YES ____NO

If so, how often? _____ time (s) per year

My suggestions for improving the program are:

Additional Comments:

Please return this form to the presenter or, if you prefer, mail or fax it. We value your opinion!

Mutual Ground
Prevention Education Department
418 Oak Street
Aurora, IL 60507
Fax: 630.897.3536