

## Mid-Service Evaluation

### 1. Basic Information

In our on-going effort to improve WorldTeach programs, we would appreciate receiving your feedback. Please make as many candid and constructive comments as you like in the space provided. Thank you.

1. Full Name:

\* 2. Program Country:

\* 3. Program Duration:

\* 4. Program Start Month

\* 5. Program Start Year:

\* 6. If we use quotes from you, may we use your name in addition to your program?

☐ Name and Program

☐ Program only

7. As referenced in the WorldTeach media waiver and social media training, WorldTeach relies on your stories to communicate our mission and continue building off our efforts in your communities year after year. Please share the web address of your blog/photo/YouTube site here for this purpose.

## 2. Self-Assessment and Experience Thus Far

\* 1. I would describe myself as:

	Strongly Disagree	Disagree	Agree	Strongly Agree
Resourceful	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Patient	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Culturally Competent	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Adaptable	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emotionally Intelligent	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Resilient	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

\* 2. What have your biggest accomplishments been, both professionally and personally?

\* 3. What has been your greatest frustration or disappointment? What could have made it less so?

\* 4. If you knew before departure what you know now...

What things do you wish you had brought?

What things do you wish you had NOT brought?

\* 5. What do you wish you had known about this country (e.g. living and working here) that you did not know before coming?

\* 6. How has your experience thus far compared to your initial expectations?

My experience exceeds my initial  
expectations

My experience meets my initial  
expectations

My experience falls short of my initial  
expectations

☐ ☐ ☐

\* 7. Please comment on how your experience has compared to your initial expectations.

## 3. Health &amp; Safety

## \* 1. General Safety

	Disagree	Agree
I feel safe in my home.	<input type="radio"/>	<input type="radio"/>
I feel safe in my community.	<input type="radio"/>	<input type="radio"/>
I feel integrated into my community, increasing my sense of safety.	<input type="radio"/>	<input type="radio"/>
I feel welcome as a foreigner in my community.	<input type="radio"/>	<input type="radio"/>
I have friends, host family members, colleagues, or community members who would help protect me in an emergency situation.	<input type="radio"/>	<input type="radio"/>
The coverage of health and safety issues at Orientation was sufficient.	<input type="radio"/>	<input type="radio"/>
I have an understanding of what to do in various emergency situations, as laid out in the Emergency Action Plan.	<input type="radio"/>	<input type="radio"/>
I always inform the Field Director of my travel plans when I go off-site.	<input type="radio"/>	<input type="radio"/>
I generally feel safe in my country.	<input type="radio"/>	<input type="radio"/>

Please comment on any of the above.

## \* 2. I have a copy of the Emergency Action Plan:

- ☐ Yes
- ☐ No

## \* 3. I know who to call (and who will call me) in an emergency:

- ☐ Yes
- ☐ No

4. Please comment in regards to safety in country (e.g. what could be improved, suggestions, etc.):

5. If you have received medical care, please rate the following aspects of your medical care:

	Disagree	Neutral	Agree	N/A
I received quality medical care.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The medical facilities were sanitary.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I could communicate with the medical staff adequately.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I received quality service & support from the WorldTeach insurance.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please comment on any of the above.

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### 4. Office of Education

\* 1. Please rate your agreement with the following statements

	Disagree	Neutral	Agree
My students are interested in learning in my class	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel appreciated for my teaching	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My local language skills are adequate for my teaching placement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My teaching skills are adequate for my teaching placement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please comment on any of the above,.

\* 2. Please rate the contribution of the following sources:

	Disagree	Neutral	Agree	N/A
My school supplied me with a Teacher Guide or Textbook	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The Internet	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Professional Learning Communities (PLCs)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Teacher Quality Coordinator	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Volunteer Resource Manual	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
WorldTeachNet	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

\* 3. Please rate the following:

	Disagree	Neutral	Agree	N/A
Professional Learning Communities (PLCs) are useful to me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The Five Step Lesson Plan Template is useful to me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The Data Analysis Tool is useful to me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The Professional Development Modules (Scholarly Articles) are useful to me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
WorldTeachNet is useful to me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The Teacher Quality Coordinator is useful to me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The Director of Education Office Hours are useful to me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am satisfied in the Educational Support I have access to from WorldTeach	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. In what ways could the WorldTeach Office of Education provide you with stronger teacher support?

## 5. Housing &amp; Placement Survey

**Please review your volunteer site/community as well as housing arrangement in this section.**

1. Please rate the following aspects of life with your host family. (If you do not live with a host family, skip this question.)

	Disagree	Neutral	Agree
My experience living with my host family is positive.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel like a member of my family.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I participate in family activities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I enjoy the food served by my family.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I would recommend my family for another volunteer.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please comment on any of the above.

2. Are there any problems with your host family/living situation and/or unusual circumstances we should know about?

\* 3. How necessary is competence in the local language for living at your site?



## 6. Part V: Field Support

1. Field Staff Name:

\* 2. This individual...

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Is accessible and eager to help.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Responds promptly to requests for help.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Anticipates needs of volunteers.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Follows through on administrative, site, or housing issues.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Keeps volunteers informed of changes and relevant information.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

\* 3. Has the Field Director conducted a site visit with you yet?

- ☐ Yes
- ☐ No

4. If yes, answer the following:

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
The site visit was useful to me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The Field Director made me feel comfortable and supported.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The Field Director gave me useful and professional suggestions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

\* 5. In what ways has this field staff member most contributed to your personal experience (e.g. through administration, training, guidance, liaising, emotional support, etc.)?

\* 6. In what ways could field staff member have given you more support?

\* 7. Please provide any additional comments or feedback you have for this field staff member: