TechShopz Sample Forms and Surveys

Sample Attendee List

TechShopz Title:
Date:
Time:
Location:

Child Last Name	Child First Name	Parent's Name	Parent's Contact Information	Permission Slip. Yes or No	Who will pick up child/contact information

Sample Confirmation Email to Parents/Guardians

To: [Parents email addresses]

CC: [Adult Attendees that are helping you]

Subject Line: [Name and Date of Event]

Dear Parents,

Please read this entire email so you do not miss any information about this event.

Attendance: If you cannot make this TechShopz PLEASE let me know now, for we have many girls on the Wait List. Thank You.

Permission Slips: You must have a Permission Slip on file with us for this school year. See attached document and follow the directions to return before the event.

Special Instructions (if necessary): [Your daughter does not need to bring anything to this TechShopz.] Or [You need to bring…ask the instructor for details of what they have to bring to this event]

Time: [1:00 to 4:00 PM]

Place: [in addition to the address, also check in with location provider for any special directions]

If you have any need to contact us the day of the event, your Day-of Contact is: [your name and a phone # you can be reached at the event]

Looking forward to seeing you there.

Thank you.

[Your name]

TechShopz Coordinator

Sample Permission Slip

My child, _____, has permission to participate in (your name and name of TechShopz Program) on (date).

During the Program activities, I may be reached at:

Name: _____

Mobile #: _____, Home #: _____

Indemnity and Waiver of Claim: I acknowledge that as a condition of the Student participating in any of the programs or activities, I agree to indemnify and hold harmless (your name), its volunteers, and the owners of the place where the program/activity is being held, from any liability arising out of the above mentioned program or activity.

Photographic Image Use: I do give permission for photos or videos to be posted on

(Name of your website), approved partner websites, or for press related purposes. No names will be used on our website.

By signing this form, I declare that I am the legal parent/guardian of the minor child listed above and authorized to grant such permission.

Parent's Signature and Date:_____

Complete and sign this form. Please return using one of these options:

Scan and email to: (your email address)
Fax to: (xxx-xxx-xxxx), Attn: (your name)
Mail to: (your name and address)
Or bring with you to event.

TechShopz Attendee Survey

Date:_____   TechShopz Name:_____   Name:_____

We are interested in finding out what you think about technology. Please check the box that best represents how true you believe the following statements are. Thank you.

powered by techgirlz	1. Strongly Disagree	2. Disagree	3. Not sure	4. Agree	5. Strongly Agree
1. Technology is fun.					
2. Technology jobs are boring.					
3. I am good at technology.					
4. I know more than my friends about technology.					
5. Learning technology is encouraged in my family.					
6. I like the challenge of technology.					
7. I want to find out more about technology.					
8. This workshop made me more interested in technology.					
9. I want to use what I learned in this workshop.					
10. I would recommend this workshop to my friends.					

11. What did you like best about this Workshop?

12. What did you like least about this Workshop?

Please use the other side if you want to write more or have any questions.

Instructor TechShopz Lesson Plan Evaluation

1. What was the name of the TechGirlz TechShopz that you taught?

_____

2. How many students attended this TechShopz?

_____

3. Where did you teach this TechShopz? Mark only one box.

❏ School or University
❏ Community/Recreation Center
❏ Business, Company, Organization
❏ Association or Conference Center
❏ Other: _____

4. How would you describe yourself? Mark only one box.

❏ Teacher (NOT in a tech-related subject area)
❏ Teacher (in a tech-related subject area)
❏ Technologist
❏ After-school program leader
❏ Curriculum developer
❏ Other: _____

5. How would you describe your previous experience with the technology used in this TechShopz? Mark only one box.

❏ This form of technology was new to me.
❏ I've had some previous experience with this technology or similar technologies.
❏ I've had significant experience with this technology or similar technologies.

6. The lesson plan for this TechShopz was easy to follow. Mark only one oval.

Strongly disagree   ○ ○ ○ ○ ○   Strongly agree

7. Students seemed interested in the subject matter of this TechShopz. Mark only one oval.

Strongly disagree   ○ ○ ○ ○ ○   Strongly agree

6. The lesson plan for this TechShopz was easy to follow. Mark only one oval.

Strongly disagree   ○ ○ ○ ○ ○   Strongly agree

7. Students seemed interested in the subject matter of this TechShopz. Mark only one oval.

Strongly disagree   ○ ○ ○ ○ ○   Strongly agree

8. I was able to access all the necessary resources and materials for this TechShopz. Mark only one oval.

Strongly disagree   ○ ○ ○ ○ ○   Strongly agree

9. This TechShopz was appropriate for middle school students. Mark only one oval.

Strongly disagree   ○ ○ ○ ○ ○   Strongly agree

10. I would recommend this TechShopz to a fellow teacher or technologist. Mark only one oval.

Strongly disagree   ○ ○ ○ ○ ○   Strongly agree

11. I felt comfortable using the technology involved in this TechShopz. Mark only one oval.

Strongly disagree   ○ ○ ○ ○ ○   Strongly agree

12. How would you rate this TechShopz overall? Mark only one oval.

Strongly disagree   ○ ○ ○ ○ ○   Strongly agree

13. Would you make any changes to the lesson plan for this TechShopz? If so, what changes would you recommend?

14. What advice would you offer to someone leading this TechShopz?

15. During this TechShopz, did you discuss your career path or interest in tech? If so, how did students respond?

16. Additional comments/suggestions: