

THE PLAY PROJECT: Parent Education Class Evaluation



Date of Class:

Location:

Activity/Topic:

Education Class Leader Name:

Tell us what you think:

<i>Please put an "x" in the box that best describes your opinion</i>	Strongly Agree	Agree	Disagree	Strongly Disagree
A. _____ was well-prepared and organized.				
B. _____ asked everyone to share ideas.				
C. _____ addressed questions and concerns.				
D. _____ was respectful and sensitive to how different families do things.				
E. I would recommend this class to my friend /family member.				
F. I now know more about my child's behavior and development.				
G. I feel more confident in dealing with my child/children's challenging behaviors in positive ways.				
H. I know how to use positive feedback to support my child's good behaviors.				
I. I am more confident about what my child needs and how to get help from others (e.g. teachers, mental health consultant at school) for the best care of my child.				

(1) I liked this class because.....

(2) My suggestion(s) for improvement are.....

(3) Other comments.....

Thank you!