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**COMPLETE**

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**Q1****NYC District 11**

What is the name of your district, network, or parish?

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**Q2****ELA**

For which area(s) of Teaching Lab services are you providing feedback? Check all that apply.

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**Q3**

How much do you agree with the following statements about the professional learning provided by Teaching Lab this year?

I am satisfied with the overall quality of Teaching Lab's professional learning sessions. **Strongly agree**

I am satisfied with the overall quality of facilitation of the professional learning sessions. **Strongly agree**

I am satisfied with the logistics and communication from Teaching Lab about professional learning in my school system. **Strongly agree**

I believe teachers in my school system better understand their curriculum because of Teaching Lab's professional learning work. **Strongly agree**

I believe Teaching Lab's professional learning work has improved the ability of teachers in my school system to deliver high-quality instruction. **Strongly agree**

Teaching Lab helped us advance our goals. **Strongly agree**

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**Q4**

How likely is it that you would recommend Teaching Lab professional learning to a friend or colleague?

**9 (Promoter)**

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**Q5****Very interested**

How interested are you in continuing to receive professional learning from Teaching Lab next year?

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**Q6**

What went well about your partnership with Teaching Lab this year?

Explicit resources were provided, effective communication between Teaching Lab facilitator and the admin team and Teaching lab facilitator and the teachers and the teachers thought the sessions were helpful.

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**Q7**

What could have been improved about your partnership with Teaching Lab this year?

Starting the planning sessions with teachers earlier in the year and in - person

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**Q8**

Do you have any additional feedback about Teaching Lab's professional learning this year?

No

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**Q9****Yes**

Do you give us permission to use any of your written comments? Only your site will be included.

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