

What Would YOU DO?

A play about choices

What Would You Do? Teacher Evaluation Survey

Brought to you by Kaiser Permanente and Oregon Children's Theatre

To help us provide the best possible Educational Theatre Programs, please take a moment to fill out this survey. We appreciate your feedback.

School: _____ Name (optional): _____

Grade Level: _____ Date of Performance: _____

Please Circle Your Choice:

The performance quality was:

Poor	Fair	Good	Excellent	
1	2	3	4	5

The performance communicated concepts about bullying:

Not Effectively	Somewhat Effectively	Extremely Effectively		
1	2	3	4	5

What did you like best about the program?

How would you improve the program?

Did you (or do you plan to) use the information in the Study Guide? If so, was it helpful?

Would you recommend this assembly to other schools? Yes _____ No _____

Additional Comments (please use the back of this page)

Please provide your email for a quick (2-3 question) online follow up survey in a week's time:

Please return this evaluation to one of the performers or the stage manager after the performance, or send it to: Oregon Children's Theatre, Attn: ETP, 600 SW 10th Avenue, Ste. 313, Portland, OR 97205-2724 or fax to 503-228-3545, attention Laura Faye Smith. Thank you!