Activity Evaluation Survey Mock Interviews



DATE	YEAR LEVEL:														
DATE:	TEAR LEVEL:														
SCHOOL:															
FIRST NAME:															
		l			1	1	1		ı	T	1	1			
LAST NAME:															
l am a			☐ Boy ☐ Girl												
Please tick if you are: Aboriginal Australian Torres Strait Islander											r				
What language	do you	most	ly use	e at hor	ne?										
Has today helpe	Has today helped you to:														Yes
Think about options for your future that you might not have thought about before														No	
Get a better idea															
Feel more confid Increase your ch					orktor	ce									
Feel more confid					er edu	cation/	trainir	ng							
If you found a jo	b toda	ay tha	t you	would	definit	ely like	to do	please	e tell u	ıs what	it is a	nd wh	у уог	u want	to do
How helpful has	today	been	for y	ou?											
Not that	helpfu	ıl													
A bit helpful															
Really helpful															
Life chan	nging														
Please tell us wh	nat you	u migh	nt do	differer	itly aft	er toda	ay:								