

# Activity Evaluation Survey

## Teacher Professional Development



FIRST NAME:

LAST NAME:

SCHOOL:

DATE:

How valuable has today been for you?

<input type="checkbox"/>	Not that valuable
<input type="checkbox"/>	Quite valuable
<input type="checkbox"/>	Extremely Valuable

Will what you learnt today help you to:

Link business ideas into your school's curriculum content?  
Guide students into specific career pathways?  
Build networks between your school and businesses?  
Inform students about what businesses expect of potential employees?

Unlikely	Likely	Definitely
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Has today enhanced:

Your perception of the organisations/industries involved in the session?  
Your understanding of the job opportunities available in the organisations/industries?  
Your networks/relationships with these organisations?

No	Yes
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Would engaging with these organisations/industries be valuable for your school?

No	Yes
<input type="checkbox"/>	<input type="checkbox"/>

Please tell us what you might do differently after today

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Do you have any ideas that would help us to make the program content or delivery better?

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Would you like to provide any feedback to the business representatives involved in this event?

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