

## Respect 2 WIN

### Prevention Education **Teacher Evaluation**

Date: \_\_\_\_\_ School: \_\_\_\_\_  
Name: \_\_\_\_\_ Grade/Class You Teach: \_\_\_\_\_

On behalf of Women In Need, Prevention Education and Outreach, we would like to extend our gratitude to you for allowing us to work with your students. Women In Need (WIN) is honored to provide Healthy Relationship Education to your students.

In the process of determining best practices for the overall Prevention Education Program, we would appreciate the opportunity to get your feedback regarding the Prevention Education Program provided for your students.

- 1) Did this program engage your students?
- 2) Do you feel this program brought value to your classroom and school?
- 3) Was the presenter able to present the information to your students in an engaging and informative way?
- 4) How would you rate this program overall (1-5, 5 being Excellent)?
- 5) What are some things you would recommend to help us improve our program?

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