

# Session Evaluation

Date: 2/27/19 Time: 11:30-12:30

Session Title: Academic Physical Education: Move Your Body, Build Your Brain

Presenter(s) Name: Suzy Koontz

Please circle the appropriate number that best indicates your judgment as to the value of the session.

	Poor - 1				Excellent - 5
The workshop description clearly communicated the focus of the workshop:	1	2	3	4	5
Presenter demonstrated thorough knowledge of the topic:	1	2	3	4	5
Presenter invited questions and/or comments from the audience:	1	2	3	4	5
Presentation challenged my thinking and held my interest:	1	2	3	4	5
I would be able to use this information (curriculum, instruction, and/or assessment) in my work immediately:	1	2	3	4	5
The pace and time frame for this workshop was appropriate:	1	2	3	4	5

What was most valuable about the workshop? Cross-Curricular, Hands-on

What changes, if any, would have made the workshop better for you? none

Additional Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Before you leave the session, please complete this form and return it to the Session's Presider. Thank you!