

How was this Family Workshop?

Thank you for attending today. We would like to know about your experience at this event, particularly related to the content on supporting reading and writing. Your responses are anonymous and will be used to make improvements to future family events. *Please do not write your name on the survey.*

Directions: Please check the box for the response that best describes your experience at this event:

- | | | | | | |
|---------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| | Very Good | Good | Fair | Poor | Very Poor |
| 1. Overall, how was this event? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Based on your experience at this event, do you agree or disagree with these statements?

After today's event:	Strongly Agree	Agree	Disagree	Strongly Disagree
2. I feel better prepared to support my child's reading and/or writing at home.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. I am likely to use what I learned at this event with my child.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I know how to get additional help or resources to support my child's reading and/or writing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please write your responses to the questions below (Use the back of this sheet as needed):

5. In what ways was this event helpful for you in supporting your child's reading and writing skills?

6. What other kinds of reading and/or writing support would you like to receive? What questions do you have?

7. Do you have any additional feedback about today's event?

Please return the survey as directed before leaving.

Thank you!



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