**Professional Development**

Sunnyside Unified School District

Professional Development

**Participant Feedback**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name: |  | Facilitator: |  |  |  |
| Site: |  | Grade Level/Content: |  | Date: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Low** |  |  |  | **High** |
|  | **1** | **2** | **3** | **4** | **5** |
| **1.** I was responsible for my own learning and stayed actively engaged. |  |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **2.** I will use something I learned today that will enhance my practice |  |  |  |  |  |

**3.** What’s Next?

Identify the next steps you need to gain knowledge of or applying technology to your practice. Explain.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **1** | **2** | **3** | **4** | **5** |
| **4.** Overall, I would rate today’s training: |  |  |  |  |  |

**5.** Other Comments: