



Intermediate Service Center No. 2

Ti E-4
DISTRICT SUMMARY OF PROGRAM EVALUATION

Kay Poyner Brown
Executive Director
2701 West Washington Blvd
Bellwood, Illinois 60104
708 544-4890 708-544-4891 Fax

DISTRICT NAME: _____

DISTRICT NUMBER: _____ INSTITUTE DATE : _____

In rating the speakers in the following areas, please circle the appropriate number: 5 being the highest, 1 the lowest.

PRESENTER: _____

TITLE OF PRESENTATION: _____

Table with 6 columns (1-5) and 5 rows (1-5). Includes 'Check one' section for Large group and Small group, and 'TOTAL # RESPONDENTS:'.

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Name of person completing this form: _____

Date: _____ Telephone #: () _____

Comments: _____