

Discovering STEM

Coordinator/Staff Feedback

Name _____

School _____

Date of Event _____

1. How would you rate the overall experience with the **Discovering STEM** kits? (Circle what applies)

For Staff	1=Poor	2	3=OK	4	5=Excellent
For Students	1=Poor	2	3=OK	4	5=Excellent
For Volunteers/parents/others (please specify)	1=Poor	2	3=OK	4	5=Excellent

2. What do you see as the strengths of the program? Please explain.

3. What do you see as areas of the program that need to be modified or improved? Please explain.

4. Do you see the Discovering STEM kit program having impact on the way that teachers in your building teach STEM subjects? Please explain.

5. Do you see the Discovering STEM kit program having an impact on the attitudes of your students towards learning about STEM subjects? Please explain.

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6. In addition to anything mentioned previously, please use this space to give us any observations that you may have regarding the ***Discovering STEM*** kit program.

7. Do you think that there is an interest in the program being used again in your building? Please explain.

Thank you for your feedback!

Regional Math and Science Center

Grand Valley State University