



Teacher Assessment Form

Dear Teacher,

We hope that you and your students enjoyed your visit today. Please could you take a moment and provide us with your feedback.

Date of Visit: _____ Number of Students: _____
 School Name: _____ Length of Visit: _____
 Teacher: _____ How did you find out about the museum? _____
 Grade: _____

<p>1. Were the arrangements made for the visit satisfactory?</p>	<p>2. Which stations were enjoyed most by your students and why?</p>
<p>3. Which stations were enjoyed the least by your students and why?</p>	<p>4. Were the tour guides able to answer all your questions? If not please share details</p>
<p>5. Were the curriculum expectations met? If not, what was lacking?</p>	<p>6. Additional Comments:</p>

Your feedback is appreciated as this information will assist us in striving to heighten the learning experience for our student visitors.

Please return this “Teacher Assessment Form” to the Gift Shop Volunteer.
 Again, thank you for your support and we look forward to seeing you again!

Christina Edwards-Scott
 Education Programmer