

**Family Engagement Project –**

**Event Evaluation Form**

*Note: All of your responses will be confidential*

1. **Background Information**
2. Name of the family engagement event:
3. Date of family engagement event:
4. District:
5. School:
6. What is your role? 1 Family member 2 School staff member
7. **Family Engagement** **Event Evaluation**
8. How satisfied were you with the family engagement event you attended?

1 Very dissatisfied 2 Dissatisfied 3 Neutral 4 Satisfied 5 Very dissatisfied

1a. Please explain your answer:

1. How helpful was the family engagement event you attended?

1 Very UNhelpful 2 UNhelpful 3 Neutral 4 Helpful 5 Very helpful

2a. Please explain your answer:

1. Do you plan on changing something at your district/school/home as a result of the family engagement event?

1 No 2 Somewhat 3 Yes

3a. Please explain your answer:

1. Do you have any suggestions to make the family engagement event more helpful?

Thank You!