

ARTS REACH TO SCHOOLS & ARTISTS IN SCHOOLS EVALUATION OF ARTIST/ PERFORMER's CLASSROOM VISIT

ARTIST FILLS THIS OUT	Artist Name			email
	Artist			eman
	Contact Info.			
	mailing address			phone
	Teacher's Name			
	Name of School	Date of Class or Performance		
	The agreed up cost of Class	on \$ Final cost of "SAME"	r \$	
TEACHER: Please fill this evaluation out and give it back to your ARTIST/PERFORMER. It is imperative that you fill this out so that the ARTIST can be paid. Thank you for participating in ARTS REACH TO SCHOOLS. NOTE: before you submit this form you will have determined that there are sufficient funds in your school's ART REACH account (access this info in on TCA's websitewww.mytuolumnecountyarts.org/arts-reach-to-schools)				
	PLEASE RATE ARTIST From 1 to 5: 1 being very poor, 5 being excellent.			
TEACHER FILLS THIS OUT	Overall Performance			
	1. Was the lesson age and grade level appropriate? Output Description:			
	2. Were the students engaged and successful? $ \bigcirc $			
	3. Was the information well presented? $ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $			
	4. Was there ample time for the hands on portion of the lesson? 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			
	5. Was the artist on time and well organized? $ \bigcirc $			
	6. Would you book this artist again and/or recommend him or her to another teacher?			
Suggestions or comments regarding this ARTS REACH class?Use back of sheet if you need to.				

TEACHER SIGNATURE DATE