

Feedback Form



School _____ District _____

Grade _____ No. of students _____

Please complete this form after teaching the unit and email, fax or mail the form to the address below. Copies of students' Assessment Rubrics (with names blacked out) would be helpful but are optional. For each question below, circle a score (5 is highest and 1 is lowest) and provide a comment where appropriate.

Does the guide provide ...

... enough information on the theory behind the <i>iMinds</i> resource?	5	4	3	2	1
... sufficient guidance in using constructivist educational techniques?	5	4	3	2	1
... adequate background information on behaviour, substance use and mental health?	5	4	3	2	1

Comment:

Do the lesson plans and learning activities provide ...

... assessment tools necessary to meet BC Curriculum requirements?	5	4	3	2	1
... pacing that is appropriate and adaptable?	5	4	3	2	1
... opportunities for students to think critically?	5	4	3	2	1

Comment:

Do students ...

... find lesson content and activities relevant and engaging?	5	4	3	2	1
---	---	---	---	---	---

Comment:

Are resources ...

... sufficient?	5	4	3	2	1
... engaging?	5	4	3	2	1
... easy to use?	5	4	3	2	1

Comment:



**University
of Victoria**

Centre for Addictions
Research of BC

909 - 510 Burrard Street | Vancouver, BC V6C 3A8
iminds@carbc.ca | Tel: 604.408.7753 | Fax: 604.408.7731