

## SolidSource Teacher Evaluation

School: \_\_\_\_\_

Class: \_\_\_\_\_

Date: \_\_\_\_\_

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Thank you for inviting **SolidSource, Inc.** into your classroom. It is very important to us that we provide the best and most useful service to you. Your time in completing and returning this form is greatly appreciated as it allows us to adjust our services to meet your needs.

1. Rating of the speaker:

Outstanding \_\_\_\_\_ Excellent \_\_\_\_\_ Good \_\_\_\_\_ Fair \_\_\_\_\_ Poor \_\_\_\_\_

2. Was the speaker on time? \_\_\_\_\_

3. What was the most important information presented?

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4. What did you like best about the presentation?

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5. What did you dislike about the presentation?

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6. Was there any information **not** provided that you would like covered in future presentations?

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