

PERSONAL INFORMATION

* 1. What is your PRIME TIME Role?

	Scholar	Storyteller
Role	<input type="radio"/>	<input type="radio"/>

* 2. Enter the name of your PRIME TIME site.

* 3. What was the address of your PRIME TIME site?

Address:

City/Town:

* 4. Please provide the information requested below.

Name:

Home Address:

Home Address 2:

City/Town:

State:

ZIP:

Email Address:

Verify Email Address:

5. If you were unable to attend any sessions, please click to indicate which. Select all that apply.

- Session 1
- Session 2
- Session 3
- Session 4
- Session 5
- Session 6
- Session 7 (if applicable)
- Session 8 (if applicable)

Please list the name of the scholar or storyteller who filled in for you during the missed session(s).

* 6. Please estimate the number of hours you spent planning, organizing, and implementing the PRIME TIME program. (Data provides a more accurate picture of the costs of PRIME TIME)

Total Planning/Preparation Hours

PROGRAM INFORMATION

* 7. Which PRIME TIME series was utilized for this program?

	Favorites	Animal Tales	Onward and Upward	Journeys	Journeys/Seedfolks	Common Ground
Series	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 8. Was this a bilingual program?

	Yes, English/Spanish	Yes, English/French	Yes, Other; please specify below	No
Bilingual	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

If other, please list the targeted languages.

BOOKS AND HUMANITIES THEMES

* 9. Please rate the effectiveness of the prescribed themes and topics for each session at generating humanities-based discussion.

	Very Effective	Somewhat Effective	Not Effective
Session 1	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Session 2	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Session 3	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Session 4	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Session 5	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Session 6	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Session 7 (if applicable)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Session 8 (if applicable)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please explain your response by listing the most/least effective themes and how you would address any theme-related issues.

* 10. Please rate the overall effectiveness of the books in each session at generating humanities-based discussion.

	Very Effective	Somewhat Effective	Not Effective
Session 2	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Session 3	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Session 4	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Session 5	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Session 6	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Session 7 (if applicable)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Session 8 (if applicable)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please explain your response by listing the most/least effective books and how you would address any book-related issues.

* 11. Please list specific examples of humanities questions that generated especially productive discussion.

TEAM MEMBERS

* 12. Please rate the working relationships between you and other implementing team members.

	Excellent	Good	Fair	Poor
Co-Discussion Leader (scholar or storyteller)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Program Coordinator	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Community Organizer	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Preschool Facilitator	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please provide specific examples of team coordination and/or areas of difficulty.

PARTICIPANTS

* 13. Based on your observations and experiences, please estimate the amount of participants that prepared for each session by reading the books together at home.

	All participants read at home	Most participants read at home	Some participants read at home	Few participants read at home	No participants read at home
Session 1	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Session 2	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Session 3	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Session 4	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Session 5	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Session 6	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Session 7 (if applicable)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Session 8 (if applicable)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please Explain Your Response

* 14. Based on your observations and experiences, please indicate the level at which participants demonstrated improved critical thinking skills over the course of the program.

	High level of improved critical thinking	Moderate level of improved critical thinking	Low level of improved critical thinking	No observed improvement
Critical Thinking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please explain your response, and cite examples of responses and conversations (if any).

* 15. Based on your observations and experiences, please indicate the rate at which each group below participated in discussion over the course of the program.

	High rate of participation	Moderate rate of participation	Low rate of participation	No participation
Parents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Children	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please explain your response, and cite examples of responses and conversations (if any).

* 16. Based on your observations and experiences, please indicate the level at which participants demonstrated an improved attitude toward reading and learning over the course of the program.

	High level of improved attitude	Moderate level of improved attitude	Low level of improved attitude	No observed improvement
Attitude	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please explain your response, and cite examples of responses and conversations (if any).

* 17. Based on your observations and experiences, please indicate the level at which participants demonstrated an increased level of positive family interaction over the course of the program.

	High level of increased interaction	Moderate level of increased interaction	Low level of increased interaction	No observed increase
Interaction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please explain your response, and cite examples of responses and conversations (if any).

* 18. What changes / improvements would you make if leading another PRIME TIME program? If none, please state this. (Please consider all aspects of the program, including training, materials, project management, and local implementation strategies.)

HW Management	<input type="text"/>
Training	<input type="text"/>
Manuals	<input type="text"/>
Books	<input type="text"/>
Local Implementation	<input type="text"/>
Other	<input type="text"/>

ADDITIONAL COMMENTS

19. Please use this space to address any issues not mentioned previously.

FINISHED!

Thank You!