## PROJECT LEARNING TREE® FACILITATOR SURVEY FORM



Facilitator Information:			
Name:			
Permanent Mailing Address:			
City: S	State:	Zip:	:
Email:			
Phone:			
Workshop Information:			
Workshop Date:	_ Workshop T	Workshop Type (circle all that apply)	
Workshop Location:	PreK-8	Secondary	Fire
Other Workshop Facilitators:	_ PreK-12	Energy & Society	Early Childhood
	Preservice	Other (Specify):	
# PLT Guides Distributed: PreK-8 Secondary (Specify): Secondary (Specify			
Length of Workshop: # of participants:	# of Participant Survey forms attached :		
Workshop Summary:			
1. Briefly outline your workshop format, specifying which P materials you included. (You can also attach an agenda if you		the PreK-8, secondary	modules, or other PLT
2. Summarize expenses and/or revenues involved in your woagency, community, or industry personnel or contributions.	rkshop. Include ar	ny in-kind support fror	n local sources, for example,
3. Tell us your overall view of the workshop – include proble	ems/successes and	your assessment of the	e participants' responses.
4. I would would not be interested in facilitatin	ng another PLT wo	rkshop because:	