

Supplemental Appendix A. Forms for teacher and parent feedback.

Team Teaching Feedback Sheet

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Used with permission.

NAME: _____

DATE: _____

	Strongly Disagree	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree	Strongly Agree
1. Lesson was well organized							
2. Demonstrated flexibility and responsiveness based on children							
3. Demonstrated strategies to ready the children to listen and participate							
4. Used clear, concise directions							
5. Engaged children in active participation during teaching							
6. Managed the group process (balance between individual and group needs)							

NOTES:

One thing I felt went well in class was:

One thing I felt did not go well in class was:

If I could have a redo for class, I would:

One question I have about the class or lesson is:

TALK: Talk and Learn for Kindergarten

Parent Survey

Please take some time to fill out this survey to help us know what went well with the TALK program. We have appreciated your support in the program so far and enjoyed being in the classroom this summer.

Does your child ...

1.Say hello in different languages (hola, guten tag, aloha, etc.)?	yes	no
2.Talk to you about any of the stories or songs from the program (i.e., animals, musical instruments, the three billy goats gruff, vehicles, fairy tales, rhyming or letter sounds)?	yes	no
3.Talk about Teacher Brittany, Alissa, or Peggy?	yes	no
4.Rhyme words or point out rhyme?	yes	no
5.Say the letters of the alphabet?	yes	no
6.Use hand signs for letters of the alphabet?	yes	no
7. Say the sounds that letters make?	yes	no
8. Clap out the parts in words?	yes	no
9. Break apart words into sounds?	yes	no

What is one thing you liked about the program?

What is one thing you would have liked to change about the program?

Do you have any additional comments or questions?