

About this

Lifelines Teacher Training

| I liked | | Poor | to | E | Excellent |
|---------|--|-------------|----|-------------|-----------|
| | Overall Session Printed materials Videos | 1 1 1 | | 3 3 3 | |

| Please rate facilitator (s): | Poor to Excellent | | | | |
|------------------------------|-------------------|---|---|---|--|
| Knowledge of topic | 1 | 2 | 3 | 4 | |
| Responsiveness to group | 1 | 2 | 3 | 4 | |
| Teaching methods | 1 | 2 | 3 | 4 | |
| Organization | 1 | 2 | 3 | 4 | |

As a result of this program, I ...

understand both the content and purpose of the Lifelines Student Lessons on Suicide Prevention.

Low 1 2 3 4 High

feel comfortable in my ability to present the four Lifelines student lessons with fidetlity.

Low 1 2 3 4 High

recognize that I may be seen as a resource to students seeking help.

Low 1 2 3 4 High

I am still confused about ... or would like more information on: (include name & phone # or e-mail if you want a response!)



| Changes? (scations?) | |
|---|--|
| Changes? Modifications? Improvements? Comments? | |
| | |
| Did this program meet your needs and | |

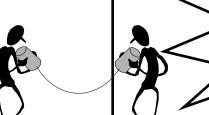
expectations?

□ No

☐ Yes

☐ Not Sure

☐ More than I expected



Additional comments I would like to make are on back...