



ARTS REACH TO SCHOOLS

EVALUATION OF ARTIST/ PERFORMER'S CLASSROOM VISIT

ARTIST FILLS THIS OUT

Artist Name

email

Artist Contact Info.

mailing address

phone

Teacher's Name

Name of School

Date of Class or Performance

Agreed upon cost of Class

\$

Final cost or "SAME"

\$

ARTIST: Please fill the top part out and hand it to your classroom teacher. They will fill out the form and TCA will give you the results with your check.

TEACHER: Please fill this evaluation out, **digitize or snap an image with your phone**, and send to: info@tuolumnecountyarts.org OR mail to: Tuolumne County Arts/ARTS, 21 N.Washington St. Sonora, Ca.

PLEASE RATE ARTIST From 1 to 5: 1 being very poor, 5 being excellent.

TEACHER FILLS THIS OUT

Overall Performance

1 2 3 4 5

1. Was the lesson age and grade level appropriate?

1 2 3 4 5

2. Were the students engaged and successful?

1 2 3 4 5

3. Was the information well presented?

1 2 3 4 5

4. Was there ample time for the hands on portion of the lesson?

1 2 3 4 5

5. Was the artist on time and well organized?

1 2 3 4 5

6. Would you book this artist again and/or recommend him or her to another teacher?

1 2 3 4 5

Suggestions or comments regarding this ARTS REACH class?-----Use back of sheet if you need to.

TEACHER SIGNATURE

DATE