



SESSION 10: SESSION PLAN

ITEMS REQUIRED FOR SESSION

Flip chart and pens
Parent refreshments
Name labels
Attendance form
Weekly evaluation forms
Parent's evaluation booklet
Parent's Certificates
Parent's gifts

NOTES FROM THE SESSION

SESSION PLAN

Feedback

ACTIVITIES

- You as a parent
- How to keep going
- Review of the programme
- Evaluation booklets
- Certificates

TO TAKE FORWARD TO NEXT SESSION





SESSION 10: WEEKLY EVALUATION

1. I FOUND THIS SESSION TO BE (PLEASE TICK BOX):

- Not informative Neutral Quite informative Very informative

2. I FEEL THAT THE GROUP FACILITATORS WERE (PLEASE TICK BOX):

- Not supportive Neutral Quite supportive Very supportive

3. I WOULD HAVE LIKED MORE INFORMATION ON

4. WE WOULD WELCOME ANY FURTHER COMMENTS ON THIS SESSION

Thank you

5. IS THERE ANYTHING FROM THIS SESSION THAT YOU WOULD LIKE THE GROUP FACILITATORS TO DISCUSS WITH YOU BY PHONE IN MORE DETAIL (PLEASE TICK BOX):

- Yes, please phone me this week No, thank you

Name:

Best contact number:

