



**ART  
CENTER  
EAST**

**ART CENTER EAST ARTISTS IN RURAL SCHOOLS  
PROGRAM EVALUATION  
For Teaching Artists**

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Thank you for evaluating Art Center East’s ARTISTS IN RURAL SCHOOLS (AIRS) program. Your feedback is very important to us! Please feel free to include additional comments, suggestions, and/or concerns on additional sheets of paper, if necessary. Ratings are based on a 5-point scale with 5 being the highest rating.

**We will begin processing your payment as soon as we receive your completed evaluation form AND as soon as we receive payment from the schools.**

**THANK YOU!!**

<b>TEACHING ARTIST:</b>	<b>DATES:</b>	<b>SCHOOL:</b>
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**A. Residency NUMBERS**

Number of student group(s) you met with each day:

Grade Level(s):

Length of each session:

Number of daily sessions:

Number of students/session:

**B. Residency PROFILE**

**LEARNING OBJECTIVES**

How did the residency meet mutually agreed upon learning targets and expectations as discussed during the pre-planning meeting?

How did the residency help the school meet the Oregon Arts Content Standards?

How did the residency support Oregon Arts Content Standards in other subjects, other than art? Please explain:

**TEACHER INVOLVEMENT/SITE COORDINATOR SUPPORT/STUDENT INVOLVEMENT**

Were teacher(s) present in classroom and actively participating in residency?

Did you receive adequate support from the Site Coordinator before and during the residency?

Did you meet other administrative staff (principal, superintendent)?  
Name:

Were the students enthusiastic and cooperative?

**FACILITIES**

Were facilities adequate for residency purposes (room assignment, storage, etc.)?

Would you return to this site?  
If 'No,' why not?

**C. ADDITIONAL INFORMATION**

1. Did activities result in a culminating project/presentation?
2. What kinds of post-residency resources/follow-up were provided, if any?

**D. Residency PLANNING**

1. Rate the quality of pre-residency planning/communication between Artist and Site?
2. How far in advance was your planning session? Was it adequate time?
3. In retrospect, is there anything you would have done differently? Please explain:

<i>Low</i>		<i>High</i>		
1	2	3	4	5
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes		No		
<input type="checkbox"/>			<input type="checkbox"/>	

**OTHER COMMENTS:**

*Thank you so much for your time and dedication to arts education!*

(Signature)

Date



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