

AUDIENCE FEEDBACK FORM
Introduction to ACEs & Trauma-Informed Education

1. Presentation Date: _____

2. School or District: _____

3. To what extent was the presentation...

i. Informative? Not at all Slightly Moderately Very Extremely

ii. Relevant? Not at all Slightly Moderately Very Extremely

4. Do you feel that any part of the presentation needed additional information?

Yes No

If yes, which section(s)?

ACEs & Trauma Impact on schools & classrooms Skills & Tools

What additional information do you feel is needed?

5. Were the presenters

a. Knowledgeable about the subject matter? Yes No

b. Able to answer audience questions? Yes No

c. Appropriately sensitive to the audience's needs? Yes No

6. What is your professional role?

7. Would you recommend this presentation to others?

Yes No

8. Any other comments or recommendations?

Questions, comments or need further resources?

Please contact the ACE Educator Program at ACEpresentation@la.gov.

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