

# UTLA School/Site Visit Design Team Feedback Form Fall 2009

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**DIRECTIONS:** Please complete the form immediately after the meeting and return to UTLA.

School or Site \_\_\_\_\_ UTLA Area \_\_\_\_\_

Chapter Chair \_\_\_\_\_ Date/Time \_\_\_\_\_

**General Rating:** 5-Fired Up    4-Interested    3-Passive    2- Need Support    1-Poor

Criteria	Rating	Comments/Observations
Number of Members at Site		
Number of Members @ Meeting		
Knowledge level of the members		
General Attitude Regarding the Topic		
Level of Commitment to Continue The RFP Process		
Principal on Board		
Chapter Chair on Board		
Other Stakeholder groups on board		

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Submitted by \_\_\_\_\_ Date \_\_\_\_\_

