



Pupil Evaluation

We hope you have enjoyed the event! PLEASE TELL US WHAT YOU THOUGHT – personal information will be used for statistical purposes only by Business & Education South Yorkshire and Yorkshire Forward to help us with the project. **Thank you!**

Event name:	Location:	Date:
--------------------	------------------	--------------

About you:								<i>Please tick ✓</i>	
First name:			Last name:			Age or DoB:			
Which school are you with?									
Ethnicity <i>Please tick ✓</i>						Gender <i>Please tick ✓</i>			
Asian	Black	Chinese	Mixed	White	Other	Male	Female		

1.a.) How much have you **enjoyed** this **event**? (please tick one box on each question ✓)

Not at all	Some of it	Mostly	Very

1.b.) What was the **best thing** about the event?

2.) Was the **activity** interesting?

Not at all	Some of it	Mostly	Very

3.) Did you enjoy **the activity**?

Not at all	Some of it	Mostly	Very

4.) Do you generally **enjoy learning about science and technology**?

Not at all	Some of it	Mostly	Very

5.) Do you think **science and technology** are important?

To you

Not at all	Sometimes	Mostly	Very

6.) **To the world**

Not at all	Sometimes	Mostly	Very

Thank you – please could you give this form in to the teacher at the end of the day!