Help us make the next lesson better

Optional pilot feedback • Please omit student names or identifying details

Book: _____ Age range: _____ Group size: _____ Date: _____

Preparation time: _____ Actual lesson time: _____ Activity: _____

What engaged learners? Include a specific moment.

Which instruction or material needs clarification?

What access or age adaptations helped?

What would you keep, change or remove?