



HEALTHY SCHOOL COMMITTEE End-of-Year Evaluation

To be completed by each committee member

I am a ... Parent/Guardian Teacher Student Principal Community Member

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	Don't Know	N/A
	1	2	3	4	5	6	7
1. The meetings start and end on time	1	2	3	4	5	6	7
2. I feel comfortable participating during the meetings	1	2	3	4	5	6	7
3. The minutes are useful for recording and keeping track of the committee's progress.	1	2	3	4	5	6	7
4. I understand what is expected of me and my role as part of the committee.	1	2	3	4	5	6	7
5. Members of the committee work cooperatively with each other.	1	2	3	4	5	6	7
6. I have a say in the planning and decision making of Healthy Schools.	1	2	3	4	5	6	7
7. As a result of the committee, I'm more likely to speak out about health issues in my school.	1	2	3	4	5	6	7
8. As a result of the committee, I have developed new skills. (leadership skills, brainstorming skills).	1	2	3	4	5	6	7
9. The committee includes a variety of members from the school community.	1	2	3	4	5	6	7
10. As a result of the committee, I'm more aware of the health issues in my school.	1	2	3	4	5	6	7
11. I feel more connected to my school, as a result of being on this committee.	1	2	3	4	5	6	7

12. What do you like about the committee?

13. What challenges/barriers exist with regards to the committee?

14. How do you think the committee could improve?

15. What changes would you like to see happen in order to increase/continue/gain your involvement?

Thank you!