



CAFE PERFORMANCE EVALUATION

Name of School or Organization _____

Your name _____ Subject/grade level _____

Show Title _____ Performance Date _____

If a study guide was available (at our website), was it (please circle one)

Very Informative Moderately Informative Not Informative None Available

Were the activities in the study guide easily incorporated into your lesson plans? Yes No

Approximately how many of the activities did you use in your classroom?

_____0% _____10% _____25% _____50% _____75% _____75+

Overall quality of the performance was – please circle one

Excellent Good Fair Poor

Your students' overall response to the performance was – please circle one

Excellent Good Fair Poor

We would appreciate your comments about the performance and the experience:

Would you recommend the Dolly Hand Cultural Arts Center to another teacher? Yes No

Please use the back of this sheet for additional comments or suggestions.

Thank you so much for your time and effort in filling out this sheet.
It was a pleasure having you in our theatre!

**1977 College Drive – Belle Glade, FL 33430
Box Office: 561-993-1160 Fax: 561-993-1162**