

2007-2008 Visiting Professor Program

Host School Evaluation of Program

Date of Visit - _____

1. Your Name: _____
2. Name of school: _____
3. Name of Visiting Professor:
4. Topic:
5. Grade(s) participating:
6. How many students attended?
7. Course subject of class visited:
8. What other topics would be most valuable to your classes or school?

9. Was the level of the presentation appropriate for your school audience?

10. How can we improve this service for your school in the future?

11. Will you participate in future years?

12. What other types of science or agriculture related opportunities/activities would be of interest to your students?

Please fax or mail to:
Agriculture Student Services
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