

SUGGESTIONS and IDEAS

School Name: _____

Please tear off and submit to
school office. **THANK YOU!**



“TEACHERS COUNT”

Dear School Staff,

We want to learn how to improve the Caring Habit of the Month Adventure to make it better and more effective for everyone. We are respectfully asking for your input. Only you know how to make it easier and how we can improve the components. Please take a few minutes to answer these questions and return this sheet to your Principal as soon as you possibly can. *Thank you very much.*

1. How many minutes of administrative and program time do you devote to the Caring Habits project each week? ___ administrative ___ program
2. On a scale from 1 (low) to 5 (high) rate each of the program components according to their importance in accomplishing the program goal – to stimulate awareness and practice of caring habits behaviors.

Student Planners	___	Teacher Idea Book (Overall)	___
Hall/Classroom Posters	___	Teacher Inspiration Books	___
Bookmarks	___	Teacher Training	___
Pencils	___	School Banner	___
Locker Signs	___	Home Table Signs	___

3. Do you think the Caring Habits are already showing some success in your classroom and / or do you think the program can become successful after more time?
YES ___ MAYBE ___ NO ___
4. Have you visited our website at www.caringhabits.org? YES ___ NO ___
If you answered NO, take a minute to explore and enjoy!
If YES, have you used the Caring Partner log in? YES ___ NO ___
If YES, have you used the Early Elementary Activities / Music offered? YES ___ NO ___
If you answered YES to any of the above, how can we improve our website?

5. What do you like best about the Caring Habit Adventure?

6. What is your number one suggestion and / or criticism that will improve the program?
(Please use reverse side)