

everyBODY dance

How Did the Project Go For You?

Name _____ Date _____

Age Group: 6-11 12-19 20-35 36-49 50-65 Over 65

Think about how your experience of the project. Please read the statements below and circle on the scale where your experience best fits.

During the project, I felt **PART OF THE GROUP**:

Much less than usual

Same as usual

Much more than usual

1	2	3	4	5
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Any thoughts?.....

During the project, I thought my **CONCENTRATION** skills:

Fizzled out

Stayed the same

Were on fire!

1	2	3	4	5
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Any thoughts?.....

During the project, I thought my **CONFIDENCE**:

Fizzled out!

Stayed the same

Improved / Fizzing!

1	2	3	4	5
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Any thoughts?.....

During the project, I found **WORKING IN A TEAM**:

Much harder than usual

Same as usual

Much easier than usual

1	2	3	4	5
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Any thoughts?.....

During the project, compared to how I usually feel, I felt **CREATIVELY**:

Empty

Buzzing with ideas

1	2	3	4	5
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Any thoughts?.....

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During the project, I felt **MOTIVATED**:

Less than usual

Same as usual

More than usual

1	2	3	4	5
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Any thoughts?.....

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During the project, my **DANCE AND MOVEMENT** skills:

Didn't change

Improved a lot

1	2	3	4	5
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Any thoughts?.....

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During the project, I found **REMEMBERING** things:

Harder than usual

Same as usual

Easier than usual

1	2	3	4	5
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Any thoughts?.....

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