

PRIME TIME Preschool Coordinator Final Report Spring 2012

PERSONAL INFORMATION

* 1. Please provide the requested information below.

Name:

Home Address:

Home Address 2:

City/Town:

State:

ZIP:

Email Address:

Verify Email Address:

* 2. Click to select the name of your PRIME TIME site.

* 3. Have you served as a PRIME TIME Preschool Coordinator previously?

If yes, please enter the number of programs.

4. If you were unable to attend any sessions, please click to indicate which below. Select all that apply.

- Session 1
- Session 2
- Session 3
- Session 4
- Session 5
- Session 6
- Session 7 (if applicable)
- Session 8 (if applicable)

PROGRAM INFORMATION

***5. Site Type—Please click to indicate the type of agency that implemented this program.**

If Other, please specify

PRESCHOOL ATTENDANCE

***6. Please list the number of preschool participants (ages 3 – 5) present at each session.**

Session 1	<input type="text"/>
Session 2	<input type="text"/>
Session 3	<input type="text"/>
Session 4	<input type="text"/>
Session 5	<input type="text"/>
Session 6	<input type="text"/>
Session 7 (if applicable)	<input type="text"/>
Session 8 (if applicable)	<input type="text"/>

PARTICIPANTS

***7. Did preschoolers demonstrate improved listening and verbal skills during the course of the program?**

Please explain your response.

PRESCHOOL RESOURCES

***8. Did the preschool the resources listed below make it easier for you to present a quality pre-reading experience?**

Please explain your response.

***9. Did you or a volunteer do a Book Walk with your preschoolers during dinner each session?**

Please Explain Your Response

***10. How often did you use the picture-graph questionnaires?**

Please Explain Your Response

***11. How effective were the picture-graph questionnaires in getting the adults to interact with the children?**

Please Explain Your Response

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***12. Did you use exploratory centers in your PRIME TIME Preschool?**

Please Explain Your Response

***13. How effective were the centers in engaging the children in pre-literacy activities?**

Please Explain Your Response

***14. Did you create a group literacy experience book over the course of your program?**

Please Explain Your Response

PRESCHOOL RESOURCES (continued)

***15. How effective was creating the group literacy experience book in enhancing group cohesiveness and communication?**

Please Explain Your Response

16. Please list/describe any additional resources/materials you would recommend for PRIME TIME PRESCHOOL:

ADDITIONAL COMMENTS

17. Please use this space to address any issues not mentioned previously.

FINISHED!

Thank You!