

# RARE CATS Year 2 Participants Workshop Completion Form

Session Title: \_\_\_\_\_ Session Dates: \_\_\_\_\_

Presenter(s)

Names: \_\_\_\_\_

County: \_\_\_\_\_

Session Data:

## 1. Audience

- preschool teachers
- elementary teachers
- middle school teachers
- high school teachers
- supervisors
- other (specify)

## 2. Support from School District

- travel
- materials
- publicity
- release time for you
- release time for participants
- other
- Contributions from other sources

## Number of Participants

\_\_\_\_\_

estimated value  
of contributions \_\_\_\_\_

Please list any other contributors: \_\_\_\_\_

\_\_\_\_\_

## 3. Duration (hours) of workshop \_\_\_\_\_

## 4. Materials disseminated (include copies of materials workshop agendas and evaluations where possible)

## 5. Attach a brief description of your workshop. Describe the ways in which you assisted other teachers in understanding the concept of scientific research and its application to classroom instruction.

Please complete this form and bring it with you to the meeting.