



Los Angeles Unified School District
Parent, Community and Student Services
District English Learner Advisory Committee



Thursday, February 11, 2016

EVALUATION

Name (optional): _____ School Name (optional): _____

Role: ☐ DELAC Member ☐ Member of the Public (optional)

Please circle the number below that indicates how much you agree or disagree with each statement. Circle one number for each statement.

	Strongly Disagree	Disagree	Neither	Agree	Strongly Agree
1. The content and information presented at the DELAC Meeting was valuable.	1	2	3	4	5
2. The information shared on the English Learners LCAP-Program & Goal Update was clear.	1	2	3	4	5
3. I had the opportunity to share my recommendations on the Comprehensive Needs Assessment.	1	2	3	4	5

REFLECTIONS

What did you appreciate most about today's meeting?	What information did you find most useful about today's meeting?
What questions might you have?	What would you like to learn more about?

Thank you for your participation.