



Lesson feedback form

Topic:	Railway Safety	/		Date:		
Year Group:				School:		
<u>Scoring</u>	<u>Scale</u>					
1 = We	ll below averag	e, 2 = Below ave	erage, 3 = Average, 4 = Good,	5 = Fantastic.		
1.	1. How would you score the overall quality of the video and presentation?					
	1	2	3	4	5	
2.	How would you score the relevance of the information presented?					
	1	2	3	4	5	
3.	How would you score the lessons plans and resource supplied to you?					
	1	2	3	4	5	
5.	Would you be projects? Yes	/ No	orking with the Heart of Eng	land Community Rail	Partnership on future	
For the	Children:					
1. 2.	Do you feel more confident using the railway? Yes / No What was your favourite part of the video/lesson?					
3.	Would you be circle the rele Care	vant one)	nowing anything else about t Railway safety	the railway? Yes / No Other	(If so, what area –	