Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Workshop Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please answer the following questions to the best of your ability

1. What are the three most useful things you learned in the workshop today?

1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. What was your favorite part of the workshop?

3. What would change in the workshop?

4. Where are you the most excited to ride? (List the place)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Any other feedback you would like to give us?

|  |  |  |  |
| --- | --- | --- | --- |
| **I feel like I can: *circle what best applies*** | **Probably Not** | **Maybe** | **Yes** |
| 1. **Adjust my helmet** | 1 2 | 3 4 | 5 |
| 1. **Use the correct hand signals while biking** | 1 2 | 3 4 | 5 |
| 1. **Ride a bike safely *on the street* with cars** | 1 2 | 3 4 | 5 |
| 1. **Lock my bike securely** | 1 2 | 3 4 | 5 |
| 1. **Figure out if something is wrong with my bike** | 1 2 | 3 4 | 5 |
| 1. **Use a map to choose a safe bike route** | 1 2 | 3 4 | 5 |
| 1. **Merge to make a left hand turn** | 1 2 | 3 4 | 5 |
| 1. **Ride my bike in all kinds of weather** | 1 2 | 3 4 | 5 |
| 1. **Ride my bike places I want to go** | 1 2 | 3 4 |  |