

Computers 4 Kids Program

Evaluation Form

Name of student who received the computer: _____

School: _____ Grade: _____ Teacher: _____

1. Do you have an Internet provider?

Yes ☐ No ☐

If yes, which one do you use? _____

2. Have you attended any of the technology enrichment courses offered?

Yes ☐ No ☐

If no, are you interested in attending computer classes provided by the district? Yes ☐ No ☐

3. Have you had any technical problems with your computer?

Yes ☐ No ☐

If yes, when you returned your computer for repair, was it received and repaired in a timely manner? Yes ☐ No ☐

4. Do you think the 2nd session you attended when you picked up your computer was helpful in getting you started? Yes ☐ No ☐

5. Do you need additional training or support?

Yes ☐ No ☐

If yes, what type of training or support do you need?

6. How often is the computer in your home being used for educational purposes?

☐ Daily

☐ Weekly

☐ Not very often

7. Please check how children in the home are using the computer:

☐ Word processing

☐ Internet research

☐ Other: (specify)

☐ Power Point

☐ Educational games

Presentations

☐ Email

8. How has receiving a computer helped the children in your home?

Person completing form: _____ Date: _____

Relationship to student: _____