



Growing
Inclusivity for
Vibrant
Engagement

SELF-ASSESSMENT FOR SINGLE OR SHORT PROGRAMS

Workshop Debrief:

TA Name(s):

Date & Time:

School Name:

Grade level(s) or Age Range:

1. What was a favorite memory from this experience?
2. What are three things you would do differently next time.
3. What elements of your classroom and behavior management worked or didn't work and why?
4. Describe one moment of impact you observed in the classroom.
5. Are there accommodations for students you wished you had thought to make in the moment?
Ones you made and would make again?