**Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

The following statements relate to the targets of the CIP Foundational Services training/workshop session Informal District Needs Assessment. Based on your Continuous Improvement Plan, please indicate your comfort level with the following:

*4= Fully Agree*

*3= Agree*

*2= Somewhat Agree*

*1= Disagree*

|  |  |  |
| --- | --- | --- |
| CIP – Informal District Needs Assessment | Pre | Post |
| I can describe our current professional development focus  |  |  |
| I can articulate our top three professional development goals |  |  |
| I can identify areas in which our district could benefit from assistance  |  |  |
| I can identify the Foundational Services offerings that meet our CIP needs |  |  |

**Reflection Questions following post survey:**

1. In what areas did you grow the most?
2. In what areas do you need further development?
3. What next steps do you plan to take to further develop your knowledge and skills related to Continuous Improvement Planning?