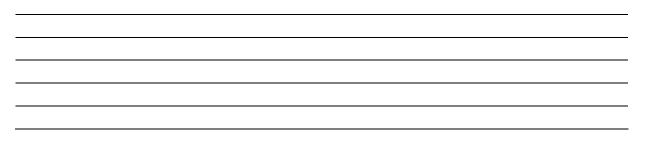
Feedback Form

Manitoba Education, Citizenship and Youth welcomes your response to the enclosed document and invites you to complete and return this feedback form.

Do	cument Title:								
Do	cument Type:								
1.	Please indicate	your	role in the lea	arning	community				
	Parent		Teacher		Resource Teacher		School Administrat		ounsellor
	School Trustee Division/District/Education Authority Administrator								
	Other:								
2.	Please indicate	whic	h format(s) of	f the d	ocument yo	u used.			
	Print Copy		□ Online I	Postinę	g 🗆	Both F	ormats		
3.	Please respond	to ea	ach of the foll	owing	statements	by circli	ng the appli	cable numb	er.
					Str	onaly	Aaree	Disaaree	Strongly

The document content is	Strongly Agree	Agree	Disagree	Strongly Disagree
a. appropriate for its intended purpose	1	2	3	4
b. suitable for a variety of learning styles (e.g., visuals, graphics)	1	2	3	4
c. clear and well organized	1	2	3	4
Comments:				

4. How effectively does this document address the needs of your learning community or organization? Please explain.



Document Title:

Feedback Form, Page 2

5.	Expl	ain which asp				
	a.	most useful:				
	_					
	-					
	b.	least useful:				
	-					
	_					
	_					
6.	Ado	ditional comm	ients:			
_						
_						
_						
_						
_						
7.		•	vou for further information? Yes No No You for further information?			
		· • •				
			Fax:			
Thank you for taking the time to provide valuable feedback.						
Plea	ase r	return the com	npleted feedback form to:			

Director Instruction, Curriculum and Assessment Branch Manitoba Education, Citizenship and Youth W120 - 1970 Ness Avenue Winnipeg, MB R3J 0Y9 Fax: 204-945-5060

