Maryland Project WILD

Facilitator Reporting Form

**Your Name:**

**Mailing Address**:

**Date of Workshop**:       **Location**:

**Facilitator(s):** *Please include the names of all facilitators*:

**Kind of Event:** *(please check one)*

☐ Workshop (3-16 hours) ☐ Institute or course (more than 16 hours)

☐ Presentation (less than 3 hours) ☐ Other (please specify)

**Length of time:**      **Number of Participants**:

**Audience: (check all that apply)**

☐ elementary teachers ☐ nature/environ. center

☐ secondary educators ☐ youth organization

☐ special education teachers ☐ daycare

☐ Head Start educators ☐other:

☐ curriculum specialists

**Specify what materials, if any, participants received (check all that apply).**

☐ Terrestrial Project WILD guide

☐ Aquatic WILD guide

☐ Other (please list)

**Was** **academic or other credit provided?** ☐ YES ☐ No

**If yes, what kind:**       How many units:       From:

**Overall participant response:**

☐ exceptionally enthusiastic ☐ somewhat disinterested

☐ generally interested ☐ not at all interested

***(Please turn over to provide additional information)***

 **Summary of Project WILD activities: (please attach agenda, if needed):**

**Preparation:** Briefly describe what means were used to announce this event (include example materials if possible; i.e. flyers).

**Follow-up:** Indicate whether follow-up with participants is planned. If so, please briefly describe.

**Time Spent on Workshop:** Please estimate how much time you spent planning for the workshop and with the actual workshop. Please factor in your time as well as the time of additional facilitators.

**Budget:** (please list fees charged and items purchased such as snacks, materials, etc)

Participant Fee (if applicable):

| Item | Value of Items |
| --- | --- |
|       |       |
|       |       |
|       |       |
|       |       |
|  | Direct Dollars: |       |
|  | In-kind contribution: |       |
|  | Total: |       |

Would you be interested in offering Project WILD again? ☐ YES ☐ NO

Did you experience any challenges offering the workshop? If so, then please describe:

General Comments:

***Thanks for your time and effort in offering Project WILD and providing this information.***

***Please return this form, surveys and sign-in sheet to Sarah Witcher***

***(Sarah.Witcher1@maryland.gov) within 2 weeks of workshop.***

*Sarah Witcher, Dept of Natural Resources, 580 Taylor Ave, E-1; Annapolis, MD 21401*

*Phone: 410-260-8566. Fax: 410-260-8596*