

Note: this document has been made into a google form which can be accessed here: <https://forms.gle/LzXhwTuJsVz8W5uq9>

Site Name: _____ Name of Trainer: _____

Trainer Email address: _____ Dates of Phase I: _____

Cycle and year: _____ Intern name (if applicable): _____
_____ spring, fall, or summer and year

1. Was the FAST team complete?

YES **NO**

2. Did the FAST Team attend 100% of the Phase I training?

YES **NO**

3. If the entire team did not attend, please explain:

YES **NO**

4. Did the team sign their FAST values?

YES **NO**

5. Did the team sign their team member agreements?

YES **NO**

6. Will the FAST team members be representative of the ethnic make-up of those that will participate in FAST?

YES **NO**

7. If the team will not be ethnically representative, please explain.

8. Are there any team members related to one another?

_____ **YES**

_____ **NO**

9. How well do you think the team will function? Please explain your answer.

10. Do you think the team will be able to maintain program fidelity? Please explain your answer.

11. How cohesive is the team? Please explain your answer.

12. How well do team members understand their roles and the time commitment required? Please explain your answer.

13. How were recommendations made by the trainer handled by the team? Please explain your answer.

14. Please provide any other comments you may have.