

Note: this document has been made into a google form which can be accessed here:
<https://forms.gle/LzXhwTuJsVz8W5ug9>

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 ECE FAST team complete?

YES

NO

2. Did the ECE 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 ECE 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.