

VSA Minnesota • Arts in Education

Artists-in-Residence • School Year 2013-2014 • Teaching Artist Evaluation Form

Your name
Collaborating Staff name
Name of school or site
Primary artistic discipline of this residency (check ONE area) <input type="checkbox"/> Dance <input type="checkbox"/> Literary <input type="checkbox"/> Media <input type="checkbox"/> Music <input type="checkbox"/> Performing <input type="checkbox"/> Visual Arts
What other academic subjects did this residency address, if any?
Dates of this residency

Which Minnesota Academic Standards in the Arts were addressed? Check those that apply, and briefly describe one activity that supported each checked. <i>(Example: the students moved in patterns to explore line and shape.)</i>
Activity: <input type="checkbox"/> 1. <u>Artistic Foundations</u> <ul style="list-style-type: none">• Demonstrate knowledge of the foundations of the arts area.• Demonstrate knowledge and use of the technical skills of the art form, integrating technology when applicable.• Demonstrate understanding of the personal, social, cultural and historical contexts that influence the arts areas
Activity: <input type="checkbox"/> 2. <u>Artistic Process: Create or Make</u> <ul style="list-style-type: none">• Create or make in a variety of contexts in the arts area using the artistic foundations.
Activity: <input type="checkbox"/> 3. <u>Artistic Process: Perform or Present</u> <ul style="list-style-type: none">• Perform or present in a variety of contexts in the arts area using the artistic foundations.
Activity: <input type="checkbox"/> 4. <u>Artistic Process: Respond or Critique</u> <ul style="list-style-type: none">• Respond to or critique a variety of creations or performances using the artistic foundations.

VSA Minnesota • Arts in Education

Artists-in-Residence • School Year 2013-2014 • Teaching Artist Evaluation Form

Please list the Learning Outcomes. Learning Outcomes describe what participants will be able to do, know, and understand as a result of your educational program. You may use state standards, IEP goals, or other specific learning objectives.

Please list the Assessment Criteria. Describe how you and the participants will know that the learning outcomes have been achieved.

Please list the Methods and Results. Describe the method(s) used to assess participant work and describe the results achieved.

In your opinion, please rate in which the Learning Outcomes were met during the residency?

	Very	Moderately	Somewhat	Not at all
<i>Learning Objectives</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Describe students' progress either artistically, socially and/or academically in regard to the identified Learning Outcomes addressed. For example, did students build communication and cooperation skills, reflect and communicate positively on their own work, or did you observe a change in any of the participants.

In your opinion, what was the rate of the success for this residency?

	Excellent	Above Average	Average	Below Average
<i>Residency Project</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What are some examples of things that went great in this residency?

What are some things that could have been improved upon?

VSA Minnesota • Arts in Education

Artists-in-Residence • School Year 2013-2014 • Teaching Artist Evaluation Form

How much collaboration and joint planning was there between you and the Collaborating Staff?

- Significant:** extended communication; collaborated on goals, delivery, and assessment methods
- Moderate:** sufficient communication to have shared goals and understanding for workshop
- Minimal:** brief communication to address logistics and topics

Please comment on your collaborative process with the Collaborating Staff.

Please rate the quality of communication between VSA Minnesota and yourself.

<i>Arts in Education Coordinator</i>	Excellent	Above Average	Average	Below Average
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please list any comments or concerns you may have in regard to your experience with VSA Minnesota or this program.

How can VSA Minnesota make this program more effective and/or efficient?

My signature (or typed) below confirms that I supplied the responses on this form using my best professional judgment.

Signature of Teaching Artist

Date

Please return the completed artist log, evaluation form and documentation to:

VSA Minnesota
Attention:
Arts in Education Coordinator
528 Hennepin Ave., Suite 305
Minneapolis, MN 55403

Phone: 612/332-3888
or 800/801-3883
Fax: 612/305-0132
E-mail: info@vsamn.org
Website: www.vsamn.org

Thank you for taking the time to complete this survey. With this information, VSA Minnesota is able to provide specific developments and stress the importance of programs such as this to the John F. Kennedy Center for the Performing Arts & the Department of VSA and Accessibility, Minnesota Department of Education and the Minnesota State Arts Board.