

**Plainville Public Schools
Plainville, MA 02762**

Educational Conference Evaluation

(To be submitted to the Superintendent's Office within two weeks of conference)

Name: _____ Date: _____

Position: _____ School: _____

Title of Conference: _____

Location of Conference: _____ Date of Conference: _____

Three new things I learned from the workshop/conference:

1.

2.

3.

Two new things I will try in my classroom:

1.

2.

One new thing I will share with my peers:

1.