Pediatric Pedestrian Study

Ryder Trauma Center / Florida Department of Transportation
University of Miami / Jackson Memorial Medical Center

TEACHERS SURVEY

Thank you for teaching the WalkSafe Curriculum to your class this week. While your class is working on their safety posters can you please take a few minutes to complete this survey. It is important that we receive your feedback to make improvements for next year. Please hand it into the office and they will be picked up next week.

Please circle the grade you teach: K 1 2 3 4 5
How many children in your class:_____
How many children in your class **walk to** school:_____**walk home from** school_____

1. Did you think that the WalkSafe curriculum was appropriate for the age and grade of your students?
   YES NO

2. Is there any information that should be added or omitted from the curriculum?
   YES NO

   If you answered YES, what information? _____
   _____
   _____

3. Did you think that the outside simulation was necessary to help teach the video and classroom safety messages?
   YES NO

4. From teaching this curriculum to your students, do you think your students will be safer when crossing the street?
   YES NO

5. Do you think that you received enough training?
   YES NO

6. Were the 3 day lesson plans easy to follow?
   YES NO

7. Is there any suggestions that you have for us regarding the WalkSafe program?
   _____
   _____
   _____
   _____