

# SI Session Form - Student

First Name

Last Name

Student ID

---

School

Teacher

Class

---

Date

---

I attended the SI  
session for:

1 hour  
2 hours  
3 hours

I came to this SI  
session in:

The beginning of the session  
The middle of the session

Did the SI present the  
material in an  
understandable  
manner?

Very  
Somewhat  
Not at all

Was this SI session  
helpful?

Very  
Somewhat  
Not at all

---