

RESIDENCY EVALUATION

V2020.01

RESIDENCY #

SCHOOL-BASED

To be completed at the end of an Artist Residency by the Site Coordinator or staff member who consistently worked with the resident artist. **Failure to submit this evaluation to Erie Arts & Culture may compromise future funding for the host site.**

ARTIST NAME:

ARTFORM:

SITE NAME:

SITE COORDINATOR:

COMMUNITY SCOPE

Over the course of this residency, please indicate the approximate total numbers for each category.

Core group students:		Participant generational groups:	
Other students involved:		Traditionalists (Born 1945 and before)	
Parents:		Baby Boomers (Born 1946 – 1964)	
Volunteers and/or attendees at culminating event:		Gen X (Born 1965-1980)	
Artist was available to students outside of allotted core group:		Millennials (Born 1981 – 1996)	
Participant zip codes:		Gen Z (Born 1997- Present)	

Specific role(s) of others involved:

OVERALL EFFECTIVENESS RESIDENCY

Please rate accordingly: 1 = less than satisfactory, 2 = acceptable, 3 = favorable, 4 = exceptional	1	2	3	4
1. Residency goals and objectives were achieved.				
2. The residency was a beneficial experience for the core group(s).				
3. The residency was a beneficial experience for the non-core group students involved.				
4. The residency provided professional development and/or ideas for teachers.				
5. Parent and/or community involvement was enhanced through the residency.				
6. The residency was a useful method to develop integrated learning across the curriculum.				

PROFESSIONALISM OF THE ARTIST

Check the appropriate response.	YES	NO	N/A
1. Artist followed school and/or district policies and procedures.			
2. Artist practiced punctuality.			
3. Artist was well prepared for each session.			
4. Artist effectively exhibited soft skills and proved to be a positive role model.			
5. Artist was available to students outside of allotted core group time.			
6. Artist actively and positively engaged the faculty.			
7. Artist demonstrated professionalism in appearance.			

ARTIST'S TEACHING ABILITY

Please rate accordingly: 1 = less than satisfactory, 2 = acceptable, 3 = favorable, 4 = exceptional	1	2	3	4
1. Development & presentation of subject matter was consistent with the planned residency goals & objectives.				
2. Artist demonstrated mastery of subject.				
3. Artist encouraged and was receptive to the students' questions and comments.				
4. Artist responded constructively to students' ideas and experiences.				
5. Artist provided immediate feedback to students.				
6. Artist stimulated students to perform at optimum level and toward independent functioning.				
7. Artist made the subject matter more meaningful through the use of examples and application.				
8. Artist demonstrated effective rapport with students.				
9. Artist presented material in an organized manner.				
10. Artist gave clear explanations.				
11. Artist encouraged students to creatively express themselves.				
12. Artist demonstrated concern about the students' progress.				

OBSERVATIONS & COMMENTS

As an educator, what knowledge and/or skill did you gain because of this residency?

Did you encounter any challenges or conflicts during the residency? If yes, please explain what you witnessed, and describe how it was resolved or addressed. Please share any suggestions for improvement.

What noticeable benefits did this residency provide for your students and/or the school community?

Would you recommend sponsoring this artist for future residencies? Yes or No? Please explain.

Share any comments about this residency which were expressed by parents, teachers and community members.

OVERALL IMPACT AND RESIDENCY REFLECTION

Erie Arts and Culture envisions a region where every person has access to meaningful experiences that utilize the arts as a tool for personal development, both in academic and communal environments.

Please provide a testimonial and personal quote, highlighting the impact of this residency, including your perspective on the value of hosting an artist in residence at your organization.

PLEASE PROVIDE SITE COORDINATOR'S SIGNATURE BELOW.

Signature

Title

Date