



WORKSHOP REVIEW
 State Form 54906 (R / 4-19)
DEPARTMENT OF NATURAL RESOURCES
INDIANA MASTER NATURALIST™
JUNIOR INDIANA MASTER NATURALIST



Submit this form along with copies of your student evaluations to report completion of an Indiana Master Naturalist Workshop.
 We are unable to process certifications until we receive this completed form, and the summary of student evaluations.

WORKSHOP COORDINATOR INFORMATION

Name: _____
 Title: _____
 Address (number and street): _____
 City, State, ZIP code: _____
 Telephone number: _____ E-mail address: _____
 Sponsoring Agencies or Organizations: _____

Please check one:

- Indiana Master Naturalist (for adults) Junior Indiana Master Naturalist (for ages 9-13)

FINAL COMPLETED WORKSHOP INFORMATION

Workshop Dates (minimum of eight (8) three (3)-hour sessions required), topics, and presenters.

DATE (mm/dd/yy)	TIME	CLASS TOPIC(S)	CORE TOPIC(S) COVERED	SPEAKER(S)
3/10/08	6-9:30pm	Birds of Prey	Zoology, People&nat.res	Mark Booth (example)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Workshop Location: _____
 Number of Actual Paid Students: _____
 Payment submitted with this report: \$_____ (\$10 per IMN student or \$5 per Junior IMN student required fee covers the cost of standard materials for the Indiana Master Naturalist program.)
 Contact name and mailing address for invoice: _____

COORDINATOR EVALUATION

How would you rate the success of the workshop? (*excellent, good, fair, poor*)

What sessions were the most well received by students? Why? (Instructor? Topic? Materials?)

Do you have a waiting list for another course?
If so, how many are on the list?

If so, do you plan to offer another course in the future?

If you offer another course, what procedures, instructors, classes, etc. will you change?

If you offer another course, what procedures, instructors, classes, etc. will you keep the same?

What information, materials or resources would you like to see the statewide advisory council provide for workshop coordinators, instructors and students?

Can we use your comments in this evaluation in publicity related to the Indiana Master Naturalist program?

Additional comments:

Note: If you have digital photos of workshop sessions in progress and are willing for us to use these in publicity related to the Indiana Master Naturalist program, e-mail them to jheaston@dnr.in.gov. Please obtain written permission from anyone in the photograph prior to submission.

THANK YOU FOR COMPLETING THIS REPORT FORM.

For more information, contact:

Jody Heaston, Indiana State Parks Coordinator

Division of State Parks

Ouabache State Park

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Bluffton, IN 46714

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Website: www.indianamasternaturalist.org



The mission of the Indiana Master Naturalist program is to bring together natural resource specialists with adult learners to foster an understanding of Indiana's plants, water, soils and wildlife, and promote natural resource volunteer service within the State of Indiana.



The mission of the Junior Indiana Master Naturalist program is to bring together natural resource specialists with young people, age 9-13 years, to foster an understanding of Indiana's plants, water, soils and wildlife, and promote natural resource volunteer service within the State of Indiana.