Feedback Form

Manitoba Education and Advanced Learning welcomes your response to the enclosed document and invites you to complete and return this feedback form.

Document Title: Middles Years Human Ecology: Manitoba Curriculum Framework of Outcomes

Document Type: Curriculum Framework

1. Please indicate your role in the learning community.
   - □ Parent
   - □ Teacher
   - □ Resource Teacher
   - □ School Administrator
   - □ School Trustee
   - □ School Division/Education Authority Administrator
   - □ Other: ____________________________

2. Please indicate which format(s) of the document you used.
   - □ Print Copy
   - □ Online Posting
   - □ Both Formats

3. Please respond to each of the following statements by circling the applicable number.

   The document content is
<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. appropriate for its intended purpose</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>b. suitable for a variety of learning styles (e.g., visuals, graphics)</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>c. clear and well organized</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

   Comments: ____________________________________________________________

4. How effectively does this document address the needs of your learning community or organization? Please explain.

   ____________________________________________________________

   ____________________________________________________________

   ____________________________________________________________

   ____________________________________________________________

   ____________________________________________________________

   ____________________________________________________________
5. Explain which aspect(s) of the resource you found to be
   a. most useful: ____________________________________________
      ____________________________________________
      ____________________________________________

   b. least useful: ____________________________________________
      ____________________________________________
      ____________________________________________

6. Additional comments: _______________________________________
      ____________________________________________
      ____________________________________________
      ____________________________________________

7. May we contact you for further information?  □ Yes  □ No
   If yes, please provide the following:
   Name: ____________________________________________
   School: ____________________________________________
   Telephone: ___________________  Fax: ___________________

Thank you for taking the time to provide valuable feedback.

Please return the completed feedback form to:

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