

Parent (Print): \_\_\_\_\_ Student (Print): \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_

## MOUNTAIN MEADOWS 21<sup>st</sup> CENTURY LEARNING ACADEMY (Grades K - 5)

Thursday, April 4<sup>th</sup>, 2019 – Thursday, May 23<sup>rd</sup>, 2019  
(Instruction by **ROBOTICS & THINGS** - Simi Valley, CA)

[www.roboticsandthings.com](http://www.roboticsandthings.com)

### Pre-Workshop Survey

1. Where did you hear about this **ROBOTICS Hands-on STEM After-School Enrichment Workshop**? School Parents Friends Newspaper Other *(Please Circle One)*
2. Do you enjoy building ANYTHING SPECIAL or do you enjoy building EVERYTHING?  

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3. Do you enjoy Tasks, Challenges or Time-Trials of ANYTHING? **Yes or No (Circle One)**  
Have you ever done Tasks with Mom, Dad or Friends? **Yes or No (Circle One)**
4. Did you attend the Spring (Jan/Mar2019) ROBOTICS Session? **Yes or No (Circle One)**
5. Do you have a Friend or Relative signed up for Workshop? **Yes or No (Circle One)**
6. Have you or a Friend or Relative attended any past **Robotics Class, Camp or Workshop** instructed by **Robotics & Things**? **Yes or No (Circle One)**
7. Are **Science & Math** important to you? **Yes or No (Circle One)**
8. What activities would you **LIKE** to see at this ROBOTICS Hands-on STEM Workshop?  

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9. What activities would you **NOT LIKE** to see at this ROBOTICS Hands-on STEM Workshop?  

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10. Which of these ways do you enjoy working? **Individually Team Group**  
*(Please Circle All That Apply)*
11. Is there anything else you would like to say or discuss with us?  

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**Thank You!**