



INTERNATIONAL SOCIETY FOR KEY WOMEN EDUCATORS
DELTA KAPPA GAMMA

BEAR Project – 1st Year Evaluation by Parents

School Name _____ Location _____

Parent's Name _____

Number of children in your family _____

What month did you receive your BEAR Bag? _____

How did your children feel when they received the BEAR Bag? _____

Are your older children reading to the new baby? _____

Was the information for parents in the bag helpful to you? _____

Do you think this is a valuable Early Literacy Project? _____

Thank you for filling out this evaluation form for us.