

MOHAWK VALLEY LIBRARY SYSTEM
START WITH SCIENCE KIT EVALUATION

Please complete and return to MVLS in the SWS red envelope.

Library/Organization/School _____

Contact Person _____

Name of Kit _____ Date Used _____

Attendance _____

Did you receive the kit in good condition? Yes _____ No _____

If yes, what was the problem?

Do you have any suggestions to improve the kit contents and/or activities? If yes, what?

Do you have any suggestions for additional kit topics?

Did you return the kit in good condition? Yes _____ No _____

Other Comments:

Thank you!