*Please complete this form individually and then share and discuss it with your co-facilitator*

Name..........................................Group................................... Session number............

1. What went particularly well in this session, and why? (Include facilitator skills/qualities you used)
2. What went less well, and why?
3. What will you do differently another time?
4. How were the group dynamics : balance, respect, focus, listening, etc?
5. Did any parents seem uncomfortable, and if so what are you doing/what can be done

to support them?

1. What key skills have you observed your co-facilitator using?

7 What skill would you like your co-facilitator to support you with?

**Thank You**