

No. of students that attended								
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5. Did you observe any of the following behaviours by students during the program?

Behaviours Demonstrated (please tick)	YES	NO	Comments
Use of mindfulness strategies?			
Identifying/naming behaviours?			
Use of cognitive behavioural therapy strategies? (i.e. self-talk/accurate thinking/checking thoughts and feelings)			
Students talking more to their peers?			
Peers supporting one another?			
Positive communication skills?			
Ability to self-soothe?			
Taking breaks when needed?			

6. Through completing this program I have observed the students in general...

Outcomes Achieved (please tick)	YES	NO	Comments
...have decreased levels of anxiety			
...have increased connection to peers			
...have increased emotion regulation skills			
...are more engaged with school			

7. Were you happy with the content and delivery of the program? Please comment.

8. What has been the most significant change you have observed through the delivery of the AAT Program at your school?

9. Do you have any suggestions for how to improve the AAT Program?

10. Any other comments?

11. For each student who participated in the program please rate each of the following areas indicating where you think they were/are at before and after the program. Please rate the student in each area from 0 (very poor) to 10 (very good), in the following table from 0 to 10.

