

Cooperative Learning Survey Template

All questions are optional. Follow each question's directions.
Write your answers to the open questions in the space provided.

Think about the group assignment identified above. Describe your own experience of working with the group. You may skip any question. Do not name classmates or include private information.

1. At the start, how clear was the task the group needed to complete?

- ☐ Not at all clear
- ☐ Slightly clear
- ☐ Moderately clear
- ☐ Very clear
- ☐ Extremely clear
- ☐ I was not present at the start

2. How clear was your own responsibility in the group?

- ☐ Not at all clear
- ☐ Slightly clear
- ☐ Moderately clear
- ☐ Very clear
- ☐ Extremely clear
- ☐ The task did not use separate responsibilities

3. How much opportunity did you have to contribute ideas?

- ☐ No opportunity
- ☐ A little opportunity
- ☐ Some opportunity
- ☐ Plenty of opportunity
- ☐ As much opportunity as I needed
- ☐ Not sure

Cooperative Learning Survey Template

All questions are optional. Follow each question's directions.
Write your answers to the open questions in the space provided.

4. When you needed an explanation, how often did another group member help you understand?

- ☐ Never
- ☐ Rarely
- ☐ Sometimes
- ☐ Often
- ☐ Always
- ☐ I did not need an explanation

5. How often did the group check that everyone understood its decisions?

- ☐ Never
- ☐ Rarely
- ☐ Sometimes
- ☐ Often
- ☐ Always
- ☐ Not sure

6. What did the group do that supported your learning, if anything?

Cooperative Learning Survey Template

All questions are optional. Follow each question's directions.
Write your answers to the open questions in the space provided.

7. What is one change that would improve the next group task?
