Your Name:
 What are you building?

 Date:
 Start Time:

Please feel free to mark or write on your set of instructions and turn them in with your evaluation. Note any confusing or inadequate steps.

Fill this section BEFORE you begin the skill builder.

What is your previous experience with Hand Tools (hacksaw, tin snips, wood saw, chisel)? *Circle one* never heard of or seen but never used used once or twice used frequently

What is your previous experience with the technology (charcoal press) you are building? *Circle one* never heard of or seen but never used used once or twice own one

| Have you ever built this type of device or something of similar construction? | Y / N | / | Not Sure |
|---|-------|---|----------|
| If yes, describe device here: | | | |

Looking at the materials list please list all materials you have not used: ______

Fill this section out only AFTER completing the skill Builder Exercise

Does your constructed tool work? *Circle one* we did not complete the skill builder we finished and it doesn't work we finished and it works If you did not complete the skill builder or it didn't work, please explain why: ______

Will you use the completed device? Y / N / Maybe

What skills did you learn today? ______

Do you feel you could teach this to someone else? Y / N / Maybe

What would you use these skills to do in the future? ______

What new design or business ideas do you have now that you have done this skill builder?

What part(s) of the activity did you enjoy? ______

What part(s) of the activity did you NOT enjoy?

When were the instructions most clear and why? ______

When were the instructions least clear and why? ______

When were the *instructor*'s directions most clear and why?

When were the *instructor*'s directions least clear and why?

Please write in any clarifications or edits that you think would have been helpful for the instructions:

Any additional input: ______

End Time: _____