

## Activity 1: Student Survey

Name: \_\_\_\_\_ Date: \_\_\_\_\_

No.	Statement	Strongly Dislike	Dislike	Like	Strongly Like
1	_____				
2	_____				
3	_____				
4	_____				
5	_____				
6	_____				
7	_____				
8	_____				
9	_____				
10	_____				

Total Score: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_