

## Comics Assessment

**\* Required**

1. **Name \***

.....

2. **Class Code \***

.....

3. **How often do you READ comic strips? \***  
which answer best fits you  
*Mark only one oval.*

- ☐ Daily
- ☐ Weekly
- ☐ Once in a while
- ☐ Never

4. **Do you have a favorite comic? \***  
*Mark only one oval.*

- ☐ Yes *Skip to question 5.*
- ☐ No *Skip to question 6.*

**Comics Assessment - Pg 2**

5. **What is your favorite comic?**
- 

### Comics Assessment - Pg 3

6. **Have you ever drawn a comic?**  
*Mark only one oval.*

☐ Yes      *Skip to question 7.*  
☐ No      *Skip to question 8.*

### Comics Assessment - Pg 4

7. **How good are you at drawing comics?**  
*Mark only one oval.*

1      2      3      4      5

not very   ☐   ☐   ☐   ☐   ☐   awesome!

### Comics Assessment - Pg 5

8. **Have you ever created a comic strip on the computer?**  
*Mark only one oval.*

☐ Yes  
☐ No      *Skip to question 10.*

### Comics Assessment - Pg 6

9.

**How good are you at creating comics using a computer?***Mark only one oval.*

1      2      3      4      5

not very

☐ ☐ ☐ ☐ ☐

awesome!

## Comics Assessment - Pg 7

*Stop filling out this form.*

10.

**How excited are you to work on comic strips on the computer?***Mark only one oval.*

1      2      3      4      5

not at all

☐ ☐ ☐ ☐ ☐

very excited

11.

**Thank you for completing this survey**Choose exit from drop down list please and then submit your survey.  
*Mark only one oval.*☐

Exit

*Stop filling out this form.*

## Comics Assessment - Post Assessment Questions Page

*Stop filling out this form.*

12.

**How much did you enjoy this project?***Mark only one oval.*

1      2      3      4      5

not at all

☐ ☐ ☐ ☐ ☐

enjoyed very much

13.

**How likely are you to create more comics on the computer?**

*Mark only one oval.*

1      2      3      4      5

not very likely   ☐   ☐   ☐   ☐   ☐   definitely will

