

# Firewise in the Classroom

## *Parent Comments*

Teacher: \_\_\_\_\_ School: \_\_\_\_\_

Parent's Name (*optional*): \_\_\_\_\_ Date: \_\_\_\_\_

- 1) Did you feel that being involved in this program with your child made you more aware of fire preparedness?
  
- 2) What materials did you find the most valuable in learning about fire safety?
  
- 3) Are you more aware now of what you need to do as a family if a fire should occur?
  
- 4) Do you have any thoughts on how we can improve this program?

**REMEMBER to keep your Red Vinyl Envelope attached to the refrigerator  
AND take it with you in case of a disaster.**

**Please return your comment sheet to your child's teacher tomorrow. These comments and your input will help the Lassen County Fire Safe Council secure funding for next year's educational grant.**

**Thank you for your comments. This will help us to make our fire education program better for future classes.**