Game Feedback



Your name: _		Child's name:			
Which game	did you play?				
How much time did you spend playing?					
Was this gam	e fun?				
What skills do you think your child learned or strengthened while playing the game?					
How would yo	ou rate this ga	ame for your child?			
1	2	3	4	5	
(too easy)		(just right)		(too difficult)	