Questionnaire for children (pre and post project)

Name:

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Age:

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Date:

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|  |  | Yes/No | Comment |
| 1. | Which differences could people have? |  |  |
| 2. | What is this? When are these aid articles used? |  |  |
| 3. | Do you know someone who has a special need? |  |  |
| 4. | How can you help a child with special need? |  |  |
| 5. | Is it possible to play with a child who does not hear, walk, see? What are these games we can play together? |  |  |
| 6. | Is being different good or bad thing? |  |  |