



NAME: _____ W#: _____

Title Of Podcast: _____

Title Of Episode: _____

Date Listened: _____ Podcast Length: _____

I – WHAT IS EPISODE ABOUT?

II – LIST THE MAIN OBJECTIVES OF THE EPISODE.

- A.
- B.
- C.

III – WHAT DID YOU THINK OF THE EPISODE OVERALL?

IV – DID YOU LEARN ANYTHING NEW? IF SO, WHAT?

- A.
- B.
- C.

V – WILL YOUR WELLNESS BE AFFECTED BY THIS EPISODE? IF SO, HOW?

- A.
- B.
- C.