



Course Evaluation Form

Course Title: _____ **Date:** _____

Please take a few moments to answer the following questions, which will be used to assist us in meeting your needs.

Course Offering:

Please circle the appropriate box:

Below Expectations

Average

Exceed Expectations

1.) Course content met your needs:	1	2	3	4	5
2.) Was course material as expected:	1	2	3	4	5
3.) Pace of the Class:	1	2	3	4	5
4.) Course Documents:	1	2	3	4	5
5.) Course atmosphere and breaks:	1	2	3	4	5

Comments? (Please elaborate) _____

The Instructor:

Please circle the appropriate box:

Below Expectations

Average

Exceed Expectations

1.) Knowledge of the subject matter:	1	2	3	4	5
2.) Was the instructor prepared:	1	2	3	4	5
3.) Communicated material effectively:	1	2	3	4	5
4.) Responded well to student questions:	1	2	3	4	5
5.) Established positive rapport with students:	1	2	3	4	5

Comments? (Please elaborate) _____

Additional Questions:

What did you find was the most valuable part of this course?	
Do you have any suggestions on how we could improve this course?	
Other comments?	

May we use your quotes/comments? YES / NO If yes, signature _____