EVALUATION FORM

Date_________________________

Course________________ Days and Class Time_________________________

1. When registering for this course, what was your opinion about the instructor:
   (1) negative,   (2) no opinion,   (3) positive

2. When registering for this course, what was your opinion about the course:
   (1) negative,   (2) no opinion,   (3) positive

3. Are you taking this course as part of your:
   (1) major,        (2) minor,           (3) other

4. This course was:
   (1) specifically required,    (2) elective,   (3) required but a choice among several

5. Your class:   (1) Freshman,       (2) Sophomore,    (3) Junior,   (4) Senior,    (5) Other


Please rank questions 7-17 as follows:  (1) Poor,    (2) Fair,    (3) Good,    (4) Excellent

7. The instructor's knowledge of the subject

8. The instructor's ability to present material in a clear and organized fashion

9. The instructor's interest and enthusiasm for the subject

10. The instructor's concern/helpfulness with individual students

11. The instructor overall

12. The class content

13. The textbook

14. Film other aids and lab facilities if applicable

15. Assignments/homework are related to the course goals

16. The exams, quizzes, reports, etc. adequately measured my understanding of the information presented in this class.

17. The course overall

PLEASE ANSWER THE QUESTIONS ON THE BACK OF THIS FORM
18. What did you like most about this course?

19. What did you like least about this course?

20. What do you consider to be the instructor’s strengths?

21. What do you consider to be areas where the instructor could improve?

22. Did the other members of the class contribute to making this course a good/bad one? If so, how?

23. What would you suggest to improve this course?

Approving: Bruce Franke  Ed Messal  Absent: David Mauritsen
Roger Hack  Don Schmidt  David Thuente
Ken Johnson  Sarah Sullivan
Bob Kendall  Curt White
Tom Laverghetta  Nash Younis
Wilson Liang