



Course Evaluation

Course Name: _____

Instructor Name _____

Please complete this course evaluation by assigning each statement a number that corresponds to your opinion. Place a mark in the column that corresponds to your numerical rating.

DO NOT PUT YOUR NAME ON THIS EVALUATION! The intent is to get objective anonymous responses from the class. By remaining anonymous, you can be more honest, and we can get a more accurate impression of how you feel about the course:

Rating System and Questions:

1: Strongly Disagree	2: Disagree	3: Neutral	4: Agree	5: Strongly Agree
Teaching Evaluation				Rating
Instructor is knowledgeable about the subject				
Instructor is Prepared				
Instructor presents material in a way that helps me learn				
Instructor encourages participation				
Instructor answers students questions				
Instructor is enthusiastic about teaching the subject				
The pace of the course was adequate				
I would recommend this instructor to others				
Assignments				Rating
The clinical and documentation assignments were difficult				
Class projects and assessments helped me learn the material				
Assignments given for the class interested me				
Location				Rating
The course location was clean				
The course location provided adequate "creature comforts"				
I would take a course at this location again				
Additional Comments				

Please return to the instructor, or place in designated location.