

## Course Evaluation

Course Title: \_\_\_\_\_ Date: \_\_\_\_\_

Please rate the following:

	<b>Excellent</b>	<b>Good</b>	<b>Satisfactory</b>	<b>Fair</b>	<b>Poor</b>
Objectives Met:	5	4	3	2	1
Practical Application:	5	4	3	2	1
Course Materials/Handouts (if applicable):	5	4	3	2	1
Organization & Schedule	5	4	3	2	1
Instructor's Format & Teaching Method	5	4	3	2	1
Instructor's Knowledge of Subject Matter	5	4	3	2	1
Instructor's Facilitation of Discussion	5	4	3	2	1
Course Met Expectations	5	4	3	2	1

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Any suggestions for future courses\*: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\*Note potential speaker if you know one that covers topic(s).