

Instructor Course Evaluation

Name: _____

Date: _____

Thank you for delivering this course with Clayton State University Center for Continuing and Professional Education! Your comments will help us improve future sessions. Please mark the box that corresponds with your level of agreement with each statement.

SA= strongly agree; A=agree; D=disagree; SD=strongly disagree; and NA=not applicable.

| | SA | A | D | SD | N/A |
|---|----|---|---|----|-----|
| I was prepared to teach this course. | | | | | |
| The course session was just the right length. | | | | | |
| The students met the prerequisites to participate in the course. | | | | | |
| The packets, course materials and equipment, if applicable, were ready and well-prepared for my course. | | | | | |
| I reviewed the learning outcomes for my course with the learners at the beginning of the course. | | | | | |
| The learning outcomes were achieved by all learners. | | | | | |
| The facility was clean and conducive to learning. | | | | | |
| The staff was friendly and helpful when I needed them. | | | | | |
| Overall, I am satisfied with my experience. | | | | | |

Please comment:

What worked well during this course and what you would do again?

What, if any, changes would you like to see made when this course is offered?

Do you have any ideas for marketing this course?

Do you have any ideas for successive or companion courses that could follow this course?

Thank you for your feedback!