

P | #rxwvhv

## Sample Evaluation

### DEPT-CCC-SS, Class Title (Prof. Firstname Lastname)

**To the student:** The purpose of this questionnaire is to obtain information from students that will contribute to an overall judgement of the instructor's teaching effectiveness. These ratings and comments will be presented to administrators and faculty on personnel committees and to the instructor's departmental or program colleagues for consideration in making recommendations for contract renewal, tenure, promotion, and salary decisions.

Your instructor will **not** receive these evaluations until final grades have been assigned to all students. You have the option to identify yourself to the instructor by clicking the checkbox on the bottom of the evaluation form.

Your honest and thoughtful evaluation is of great value and it will be given serious consideration. Thank you for your careful responses.

#### 1. Gender:

#### 2. Class year:

#### 3. Majors and minors

Major(s): Minor(s): 

#### 4. Reason for taking the course:

GE:  Major/Minor:  Elective: 

#### 5. Before taking this course your interest in the subject was:

<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
very low				very high

Explanation:

#### 6. Your interest in the subject matter increased significantly:

<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
strongly disagree				strongly agree

Explanation:

#### 7. Rate the amount of effort that you put into this course:



