

CLASS EVALUATION FORM FOR STUDENTS
(to be distributed and completed at the **sixth session** of the class)

COURSE TITLE: _____

INSTRUCTOR: _____ SEMESTER: _____

ABOUT YOU:

1. Why did you enroll in this course (e.g., interest in subject, reputation of the teacher, other)? Please specify. _____

2. How many complete sessions of the class have you attended? _____

3. Have you read the assignments, prepared for discussion, and/or participated in class activities? Please comment. _____

4. What are your preferred modes of learning? (Check as many as apply):

_____ informative lecture

_____ class discussion

_____ visual aids

_____ guest speakers

_____ recommended outside reading

_____ artistic self-expression

_____ clear course outline, effectively pursued

_____ open-ended curriculum shaped by instructor and class interests

_____ other (please indicate)

CONTINUED ON REVERSE SIDE

ABOUT THE COURSE:

1. The course was most helpful to me in the following way(s):
____ intellectual interest and stimulation
____ shared experience
____ assistance with life issues
____ developing spiritual understanding
____ learning new skills

2. In addition to thanking the instructor for time and contribution, I have the following suggestions of ways in which I would have benefitted further from the course:
more of _____

less of _____

3. I offer the following specific comments about hearing and seeing in this class: _____

4. Were the content and conduct of the class what you expected? Yes ___ No ___

Comment: _____

If not, did you speak to the teacher? Yes _____ No _____

If not, please explain. _____

5. Do you want to discuss your concerns and ideas about this course or possible future courses with a member of the Curriculum Committee? If so, please drop a note in the Curriculum Box in the OLLI office.