

Student Evaluation of Instructor, Course, and Facility

Instructor Name _____ Date _____

Course Title _____

Course Provider _____

Course Location _____ Delivery Method _____ Classroom _____ Zoom _____ Hybrid _____

Evaluation of Instructor (please check one box for each question)

Was professional, personable, and enthusiastic

Was well prepared and organized

Was knowledgeable of subject matter and communicated it clearly

Encouraged class participation and feedback

Used pertinent examples and illustrations

Answered questions effectively

Would you take another class with this instructor?

Comments: _____

5 Excellent	4 Great	3 Average	2 Fair	1 Poor

___ Yes ___ No

Evaluation of Course

Objectives were clearly stated

Course content, handouts, and activities were relevant

Class started and ended on time and was paced appropriately

Do you feel your knowledge/competence has increased?

Did you gain at least one thing you can implement in your business?

Comments: _____

5 Excellent	4 Great	3 Average	2 Fair	1 Poor

___ Yes ___ No

___ Yes ___ No

Evaluation of Facility (classroom only)

The facility was conducive to learning ___ N/A ___ Yes ___ No

Comments: _____

What did you find most valuable? _____

How could the course be improved? _____
