

STUDENT COURSE EVALUATION QUESTIONNAIRE

COURSE:	
INSTRUCTOR:	
TERM AND YEAR:	

PLEASE CROSS THE RESPONSE THAT REPRESENTS YOUR OPINION.

TEACHING APPROACHES

Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
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Yes	No
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<input type="radio"/>	<input type="radio"/>
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1. The instructor stimulated my interest in the subject.
 2. The instructor managed classroom time and pace well.
 3. The instructor was organized and prepared for every class.
 4. The instructor encouraged discussions and responded to questions.
 5. The instructor demonstrated in-depth knowledge of the subject.
 6. The instructor appeared enthusiastic and interested.
 7. The instructor used a variety of instructional methods to reach the course objectives (e.g. group discussions, student presentations, etc.)
 8. The instructor challenged students to do their best work.
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9. The instructor was accessible outside of class.
 10. Did the instructor actively attempt to prevent cheating in this course?

Comments (Teaching Approaches)

FEEDBACK AND ASSESSMENT

Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
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11. Information about the assessment was communicated clearly.

12. Feedback was provided within the stated timeframe.

13. Feedback showed how to improve my work (e .g. corrections including comments).

Comments (Feedback and Assessment)

RESOURCES AND ADMINISTRATION

Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
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☐ ☐ ☐ ☐ ☐

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14. The course was supported by adequate library resources.

15. Blackboard resources for the course were useful.

16. Instructor gave guidance on where to find resources.

Comments (Resources and Administration)

ADDITIONAL QUESTION	Yes	No
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the course.

- | | | |
|--|-----------------------|-----------------------|
| 18. The course was delivered as outlined in the syllabus. | <input type="radio"/> | <input type="radio"/> |
| 19. Instructor explained the grading criteria of the course. | <input type="radio"/> | <input type="radio"/> |
| 20. Exams related to the course learning outcomes. | <input type="radio"/> | <input type="radio"/> |
| 21. Projects/ assignments related to the course learning outcomes. | <input type="radio"/> | <input type="radio"/> |

Comments (Additional Questions)

OVERALL EXPERIENCE	Yes	No
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23. Would you recommend this course to a fellow student? ☐ ☐

Excellent	Very good	Good	Fair	Poor
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24. Overall, how do you rate your experience in this course? ☐ ☐ ☐ ☐ ☐

A:	B:	C:	D:
0	5	9 – 12h	
–	–	12 – 16h	
4h	8h		

25. How many hours did you spend per week on preparation/homework for this course? ☐ ☐ ☐ ☐

Comments (Overall Experience)

**STUDENT SELF
EVALUATION**
Please comment on your own work for
this course. activities.

Strongly
Agree

Neutral

Disagree
Strongly
Disagree

27. I feel I am achieving the learning outcomes.

☐☐☐☐☐

Comments (Student Self Evaluation)

COMMENTS ON STRENGTHS AND WAYS OF IMPROVEMENT

- What changes would you recommend to improve this course?
- What did you like best about your instructors teaching?
- What did you like least about your instructor's teaching?
- Any further, constructive comment: