

Elective Feedback: Academic Year XXXX

RESPONSIBLE FACULTY:

ELECTIVE TITLE:

DEPARTMENT:

NUMBER OF STUDENTS:

1. List the faculty with whom you worked most closely and answer the following: S/he was an effective teacher. (poor = 1 to excellent=5).

	# of Responses	Mean	Low	High
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2. The faculty/department was prepared for my arrival.

3. Stated course objectives accurately reflected the course.

4. I was able to meet my personal learning objectives.

5. Evaluation methods used were appropriate and fair.

6. Course length was appropriate to content and activities.

7. I would recommend this elective to other students.

8. Overall rating of the course (poor = 1 to excellent=5).

9. Suggestions for course improvements:

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General Comments:

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