



# STUDENT OPINION OF LABORATORY AND ACTIVITY TEACHING EFFECTIVENESS

Use only a #2 pencil to mark this form.  
Completely darken the ovals you select.



INSTRUCTOR \_\_\_\_\_ CLASS \_\_\_\_\_ SECTION \_\_\_\_\_

Individuals needing assistance in reading or filling out this form due to a disability, please contact Institutional Planning and Academic Resources in ADM 112 to arrange for accommodations.

You are being asked to provide your opinion regarding the effectiveness of your instructor in the attitudes or behaviors listed below. Only the ratings of the class as a whole will be reported; individual student ratings will not be identifiable. You may also supplement this anonymous questionnaire with a formal signed letter to the department chairperson. DO NOT MAKE WRITTEN COMMENTS ON THIS FORM.

This evaluation form is designed for use in a course where laboratory, practicum, or field activities are the major part of the course requirements.

Use the rating scale below to respond to items 1 - 14. For each item below fill in the lettered circle you select for that item in the appropriate space to the right of the item.

A = Excellent  
B = Above Average  
C = Average

D = Below Average  
E = Far Below Average  
NA = Not applicable or no opportunity to observe

This instructor:-	A	B	C	D	E	NA
1. Made course requirements clear.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Collected enough relevant information to assign grades.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Used fair and impartial grading methods.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Increased my understanding of the subject.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Was well prepared for class or activity.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Used class or activity time effectively.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Helped me apply theory or concept to class activity.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Showed concern for students.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Helped me learn the material.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. Provided individual assistance as necessary.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. Demonstrated proper and safe use of the equipment or technique.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. Demonstrated or explained technical skills as necessary.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. Was accessible to students during the class activity.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. The overall effectiveness of this instructor is:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

### Please answer the following informational items.

15. Based on mid-term exams, projects, and graded assignments to date, what is your current grade in this class?

A

B

C

D or F

Other (Credit/No Credit, Audit, Incomplete, etc.)

16. You are a:

Freshman/Sophomore

Junior/Senior

Graduate Student

Other (e.g., Open University, Audit, etc.)

### SUPPLEMENTAL SECTION

The area below is for use in responding to additional rating items. Follow the instructions printed on the additional questionnaire for marking your responses. If no additional questions have been provided, leave this area blank.

17. 1 2 3 4 5 6 7

18. 1 2 3 4 5 6 7

19. 1 2 3 4 5 6 7

20. 1 2 3 4 5 6 7

21. 1 2 3 4 5 6 7

22. 1 2 3 4 5 6 7

23. 1 2 3 4 5 6 7

24. 1 2 3 4 5 6 7

25. 1 2 3 4 5 6 7

26. 1 2 3 4 5 6 7

### OFFICE USE ONLY

	SEQ #	COURSE ID#
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