

ASPIRA CTC

COURSE EVALUATION

Course Title: _____ Date: _____

Instructor: _____

Let us have your ratings for the following questions.

Instructions: Please check **ONE** box for each question. Rate your answers: **(1)** poor or low, **(2)** below average, **(3)** average, **(4)** good and **(5)** excellent or high.

	1	2	3	4	5
1. How would you rate the organization of the course? (In other words, procedures, use of time, quality of handouts and materials)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Presentation of material by instructor?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Was the instructor helpful?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Did the instructor answered your questions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Were the room, equipment and training facilities adequate?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Please rate how closely the course met you expectations and needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Please rate the overall usefulness to you of the information presented. (How much did you learned?)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Please rate your satisfaction with the ratio of instructor(s) to participants. (Were there to many students?)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Please rate your satisfaction with the pace of presentation (In oder words, not to fast to keep up/not to slow for progress)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Would you recommend your friends and family to take this course?	<input type="checkbox"/> Yes		<input type="checkbox"/> No		

10. Comments:
