

# Foreign Languages Course Evaluation Template

TEST 0000 - S00 CRN: .....

- Semester level: **GR**
- Please indicate your intended concentration/program:

## Student Information

1. Please indicate your reason(s) for taking this course (check all that apply).

- Pre-requisite for other course(s)
- Requirement for concentration
- Elective within a concentration
- Elective outside concentration
- Reputation of instructor
- Interest in topic

2. Please indicate how often you attended class.

<input type="radio"/> Always	<input type="radio"/> Frequently	<input type="radio"/> Half of the time	<input type="radio"/> Sometimes	<input type="radio"/> Seldom	<input checked="" type="radio"/> (reset) .....
------------------------------	----------------------------------	--	---------------------------------	------------------------------	--

3. Please indicate the number of hours per week you spent on this course outside of class.

<input type="radio"/> 0-2 hours	<input type="radio"/> 3-4 hours	<input type="radio"/> 5-6 hours	<input type="radio"/> 7-8 hours	<input type="radio"/> 9+ hours	<input checked="" type="radio"/> (reset) .....
---------------------------------	---------------------------------	---------------------------------	---------------------------------	--------------------------------	--

## Effectiveness of Course

1. How clear were the goals and objectives of this course?

<input type="radio"/> Very clear	<input type="radio"/> Clear	<input type="radio"/> Somewhat clear	<input type="radio"/> Unclear	<input type="radio"/> Very unclear	<input checked="" type="radio"/> (reset)
----------------------------------	-----------------------------	--------------------------------------	-------------------------------	------------------------------------	--

2. Did the activities and materials for this course consistently help you achieve the course objectives?

<input type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> (reset)
---------------------------	--------------------------	--

3. How challenging were course assignments?

<input type="radio"/> Very challenging	<input type="radio"/> Challenging	<input type="radio"/> Somewhat challenging	<input type="radio"/> Easy	<input type="radio"/> Very easy	<input checked="" type="radio"/> (reset)
--	-----------------------------------	--	----------------------------	---------------------------------	--

4. What knowledge or skills did this course help you develop? Please comment on your own learning and intellectual growth.

4000  
.....

5. Please indicate your overall evaluation of the quality of the course.

<input type="radio"/> Excellent	<input type="radio"/> Good	<input type="radio"/> Satisfactory	<input type="radio"/> Poor	<input type="radio"/> Very poor	<input checked="" type="radio"/> (reset)
---------------------------------	----------------------------	------------------------------------	----------------------------	---------------------------------	--

6. Please elaborate on your responses above, or on anything else you wish to discuss about the quality of the course.

4000  
.....

## Effectiveness of Instruction

1. How well prepared was the instructor for class meetings?

<input type="radio"/> Very well prepared	<input type="radio"/> Prepared	<input type="radio"/> Somewhat prepared	<input type="radio"/> Poorly prepared	<input type="radio"/> Very poorly prepared	<a href="#">(reset)</a>
--	--------------------------------	---	---------------------------------------	--	-------------------------

2. How well did the instructor explain course material?

<input type="radio"/> Extremely well	<input type="radio"/> Reasonably well	<input type="radio"/> Satisfactorily	<input type="radio"/> Poorly	<input type="radio"/> Very poorly	<a href="#">(reset)</a>
--------------------------------------	---------------------------------------	--------------------------------------	------------------------------	-----------------------------------	-------------------------

3. How helpful were the instructor's comments on your work?

<input type="radio"/> Very helpful	<input type="radio"/> Helpful	<input type="radio"/> Somewhat helpful	<input type="radio"/> Unhelpful	<input type="radio"/> Very unhelpful	<a href="#">(reset)</a>
------------------------------------	-------------------------------	--	---------------------------------	--------------------------------------	-------------------------

4. How clear were the criteria for grading in this course?

<input type="radio"/> Very clear	<input type="radio"/> Clear	<input type="radio"/> Somewhat clear	<input type="radio"/> Unclear	<input type="radio"/> Very unclear	<a href="#">(reset)</a>
----------------------------------	-----------------------------	--------------------------------------	-------------------------------	------------------------------------	-------------------------

5. Please indicate your evaluation of the instructor's overall effectiveness.

<input type="radio"/> Excellent	<input type="radio"/> Good	<input type="radio"/> Satisfactory	<input type="radio"/> Poor	<input type="radio"/> Very poor	<a href="#">(reset)</a>
---------------------------------	----------------------------	------------------------------------	----------------------------	---------------------------------	-------------------------

6. Please elaborate on your responses above, or anything else you wish to discuss about the teaching in this course.

[4000](#)

[Save for Later](#)

[Review Responses »](#)