

Community College of Philadelphia

INSTRUCTOR COURSE EVALUATION

INSTRUCTOR: _____

COURSE NAME: _____

Course Ref No.

SUBJECT

COURSE NUMBER

Date

Mon	Day	Year

1. Did you meet the course objectives as outlined?	Yes	No
2. Did you feel you were adequately prepared to teach this course?	Yes	No
3. Did you receive sufficient notice and a clear understanding of what was expected of you in this course?	Yes	No
4. Do you believe that students received what was expected from your course?	Yes	No
5. Have you completed the attendance report?	Yes	No
6. Have you submitted the attendance report within the time allotted?	Yes	No
7. Did your attendance report include names of students who were not on your class list?	Yes	No
8. Were the instructional materials (audio/visuals, equipment, computers, etc.) available to support the course?	Yes	No
9. Do you have adequate equipment and supplies for student use in the course?	Yes	No
10. Were your classroom and physical surroundings adequate to conduct this course?	Yes	No

COMMENTS: _____
