Midterm Evaluation Form

Department __________ Course: ________________ Date __________

Name of Instructor_____________________________________

Please fill in the blank with the response that best represents your agreement with each statement. If the question does not seem to apply, please leave the item blank.

A = Agree with the statement
D = Disagree with the statement
N = Neither agree nor disagree with the statement

Comments are welcome.

1. The course requirements and expectations were clearly explained by the instructor and/or in the syllabus. _______

2. The instructor appears to have a thorough knowledge of the subject matter. _______

3. The instructor is enthusiastic about the subject matter. _______

4. The instructor is prepared for each class. _____

5. The instructor presents the material clearly. _____

6. The instructor encourages student participation. _____

7. The instructor provides time for questions. _____

8. The instructor responds effectively to questions. _____

9. The instructor is available for help outside of class. _____

10. The instructor prepares students for questions on exams. _____

11. The instructor grades homework fairly and returns assignments in a timely manner. _____

12. The instructor provides appropriate feedback on course assignments and exams. _____

13. The materials for the class are useful _________

14. The instructor effectively manages the class time _________
Comments: Please explain any answer you think will help your instructor improve his/her teaching.

13. What are your instructor’s strengths?

14. What would you like your instructor to improve?