

STUDENT FEEDBACK - COURSE IDENTIFICATION FORM

INSTRUCTIONS

Temple University

1. Please ensure that the information printed below corresponds to the information printed on the outside envelope and on the labels attached to the the Student and Instructor envelopes inside.
2. If the course information is incorrect or incomplete, clearly print the correct information in the Replacement Information column to the right of the information being replaced. Be sure to print all letters and numbers that will fully define the field. For example, to indicate that the evaluations are for section number 002 rather than section 001, print the section number (002) in the Replacement Information column.
3. If the instructor information is incorrect or incomplete, use the Replacement area below each instructor to make corrections. The order that instructors are listed is very important. If only one instructor taught the course, the instructor should be listed as Instructor 1. If 2-4 instructors taught the course, the instructors must be listed in the same order as they were rated by the students on the Multi-Instructor Student Feedback Forms.

To delete an instructor's name, print the word "DELETE" in the Replacement area below the instructor to be deleted. To add an instructor's name, clearly print the instructor's name and TUid in the appropriate instructor Replacement area. To change the name or TUid of an instructor, print the corrected name and/or TUid in the Replacement area below the instructor to be changed.

4. Place this sheet in front of the Instructor and Student envelopes and insert these three items into the outer envelope.
5. Seal the outer envelope and return it to the location specified in the enclosed instruction sheet or the location specified by your professor.

Course Information

Replacement Information (print clearly)

Course Reference Number (CRN):	_____
College-Subject Code:	_____
Campus Code:	_____
Course Name:	_____
Course Number:	_____
Section Number:	_____
Class Enrollment:	_____
Meeting Time(s) and Days:	____:____:____ Days _____ ____:____:____ Days _____
Location:	_____
Number of Instructors:	_____

Instructor Information

Please specify a TUid for each instructor added or replaced.

Instructor 1	Name: _____	Replacement _____	TUid: _____
Instructor 2	Name: _____	Replacement _____	TUid: _____
Instructor 3	Name: _____	Replacement _____	TUid: _____
Instructor 4	Name: _____	Replacement _____	TUid: _____

PLEASE DO NOT WRITE IN THIS AREA



TEMPLE UNIVERSITY STUDENT FEEDBACK - INSTRUCTOR FORM



Check the following course/instructor identification information carefully. If the information is blank, incomplete, or incorrect, make corrections on the enclosed Course Identification Form.

- Use a No. 2 pencil or a blue or black ink pen only.
- Do not use pens with ink that soaks through the paper.
- Make solid marks that fill the response completely.
- Make no stray marks on this form.

CORRECT: ● INCORRECT: ✓ ✗ ○

COURSE/INSTRUCTOR IDENTIFICATION

IMPORTANT INSTRUCTIONS

1. Complete this form and place it in the Instructor Form envelope. Seal the Instructor Form envelope and place it in the large envelope along with the Course Identification Form, the student feedback forms, and any additional item sheets. If you use additional item sheets, make sure that you include as many sheets as are needed for all students in your section and report the number of additional items by completing the box at the bottom left of this form.
2. Ask a student volunteer to distribute and collect the student feedback forms. The student should read the directions for completing the forms to the class, distribute and collect the materials, package the materials as described in the enclosed instructions, and then return all materials to the designated office. The instructor must leave the room while the materials are distributed, completed, collected, and packaged.
3. Make sure that the student volunteer understands and follows the enclosed instructions for distributing, collecting, packaging, and returning the feedback packet.

FEEDBACK DATE		
MO.	DAY	YR.
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③ ③	③ ③	③ ③
④ ④	④ ④	④ ④
⑤ ⑤	⑤ ⑤	⑤ ⑤
⑥ ⑥	⑥ ⑥	⑥ ⑥
⑦ ⑦	⑦ ⑦	⑦ ⑦
⑧ ⑧	⑧ ⑧	⑧ ⑧
⑨ ⑨	⑨ ⑨	⑨ ⑨

WHAT IS YOUR RANK?

Teaching Assistant

Adjunct

Instructor

Assistant Professor

Associate Professor

Full Professor

Other

DOES THIS COURSE MAKE USE OF ANY OF THE FOLLOWING? USE THE FOLLOWING SCALE TO MAKE YOUR RESPONSE:

N = None (or little) required
S = Some required
M = Much required

On-line learning

Distance learning

Use of courseware (e.g., "Blackboard")

World Wide Web

Faculty use of e-mail

Student use of e-mail

WHICH OF THE FOLLOWING ITEMS BEST REPRESENT THE APPROACHES USED IN THIS COURSE? (MARK ALL THAT APPLY)

Lecture

Discussion/recitation

Seminar

Skill/activity

Laboratory

Field Experience

Studio

Multimedia

Practicum/Clinic

On-line

Other

APPOINTMENT STATUS

Tenured

Tenure Track

Non-Tenure Track

CO-TEACHING

Did you co-teach this course? Yes No

If yes, were you the course director? Yes No

NUMBER OF ADDITIONAL ITEMS ON STUDENT FORMS

① ①

② ②

③ ③

④ ④

⑤ ⑤

⑥

⑦

⑧

⑨

FULL / PART - TIME

Full-Time

Part-Time

NUMBER OF TIMES YOU HAVE TAUGHT THIS COURSE

First Time

2 - 4

5 - 7

8 - 10

More than 10 times

DESCRIBE THE COURSE REQUIREMENTS WITH RESPECT TO THE FEATURES LISTED BELOW. USE THE FOLLOWING SCALE TO MAKE YOUR RESPONSE:

N = None (or little) required
S = Some required
M = Much required

Writing

Oral communications

Computer applications

Group work

Mathematical/quantitative work

Experiential learning

Critical thinking

Creative/artistic/design endeavor

NUMBER OF YEARS TEACHING AT TEMPLE

0 - 1

2 - 5

6 - 9

10 - 20

More than 20

WOULD YOU LIKE TO TEACH THIS COURSE AGAIN?

Yes

No

PLEASE DO NOT WRITE IN THIS AREA



Temple University Student Feedback Form - SINGLE INSTRUCTOR



YOUR RATINGS WILL BE ANONYMOUS AND THE INSTRUCTOR WILL NOT RECEIVE FEEDBACK ABOUT THE COURSE UNTIL AFTER ALL GRADES HAVE BEEN SUBMITTED FOR THE SEMESTER.

S1
Single-Instructor

INTRODUCTION

Temple University is interested in obtaining your feedback about our courses and our faculty. The results of this questionnaire are used by instructors to improve their teaching and course materials. Your responses will also help the faculty and administration make merit, tenure and promotion decisions, as well as other important decisions about how courses are taught at the University. Please be assured that we will treat your responses seriously and confidentially. Thank you for taking the time to complete this questionnaire. (Recommended time: 15 minutes)

USE ONLY A PENCIL OR A DARK BLUE OR BLACK INK PEN - FILL IN RESPONSES COMPLETELY CORRECT: ● INCORRECT: ✓✗○

Course/Instructor Information

Print the course/instructor information.

DEPARTMENT: _____

COURSE #: _____ SECTION: _____

INSTRUCTOR: _____

TODAY'S DATE: ____/____/____

Student Information

Answer each item below if it applies to you and this course.

Before enrolling, my level of interest in the subject matter of this course was	Expected grade in this course (mark only one)	On average, hours per week spent preparing for class and completing course assignments
<input type="radio"/> Low <input type="radio"/> Moderate <input type="radio"/> High	Regular Medical <input type="radio"/> A <input type="radio"/> H <input type="radio"/> B <input type="radio"/> HP <input type="radio"/> C <input type="radio"/> P <input type="radio"/> D <input type="radio"/> F <input type="radio"/> F	<input type="radio"/> 8 or more <input type="radio"/> 6 up to 8 <input type="radio"/> 4 up to 6 <input type="radio"/> 3 up to 4 <input type="radio"/> 2 up to 3 <input type="radio"/> 1 up to 2 <input type="radio"/> Less than 1
		Course was <input type="radio"/> Required <input type="radio"/> Elective

General Information for All Courses

Rate each item below using the scale to the left where SA = Strongly Agree and SD = Strongly Disagree. If an item does not apply, select NA (Not Applicable).

Strongly Agree
Agree
Neutral
Disagree
Strongly Disagree
Not Applicable

SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA

- I came well prepared for class.
- The instructor clearly explained the educational objectives of this course.
- The instructor was well organized and prepared for class.
- The instructor was conscientious in meeting class and office hour responsibilities.
- The instructor promoted a classroom atmosphere in which I felt free to ask questions.
- The instructor provided useful feedback about exams, projects, and assignments.
- So far, the instructor has applied grading policies fairly.
- The instructor taught this course well.
- The course content was consistent with the educational objectives of this course.
- The course increased my ability to analyze and critically evaluate ideas, arguments, and points of view.
- I learned a great deal in this course.

Additional Items

If you were asked to answer additional items, use the area below. If an item does not apply, select NA (Not Applicable).

High	Low	High	Low	High	Low	High	Low	High	Low
1. (5) (4) (3) (2) (1) NA		11. (5) (4) (3) (2) (1) NA		21. (5) (4) (3) (2) (1) NA		31. (5) (4) (3) (2) (1) NA		41. (5) (4) (3) (2) (1) NA	
2. (5) (4) (3) (2) (1) NA		12. (5) (4) (3) (2) (1) NA		22. (5) (4) (3) (2) (1) NA		32. (5) (4) (3) (2) (1) NA		42. (5) (4) (3) (2) (1) NA	
3. (5) (4) (3) (2) (1) NA		13. (5) (4) (3) (2) (1) NA		23. (5) (4) (3) (2) (1) NA		33. (5) (4) (3) (2) (1) NA		43. (5) (4) (3) (2) (1) NA	
4. (5) (4) (3) (2) (1) NA		14. (5) (4) (3) (2) (1) NA		24. (5) (4) (3) (2) (1) NA		34. (5) (4) (3) (2) (1) NA		44. (5) (4) (3) (2) (1) NA	
5. (5) (4) (3) (2) (1) NA		15. (5) (4) (3) (2) (1) NA		25. (5) (4) (3) (2) (1) NA		35. (5) (4) (3) (2) (1) NA		45. (5) (4) (3) (2) (1) NA	
6. (5) (4) (3) (2) (1) NA		16. (5) (4) (3) (2) (1) NA		26. (5) (4) (3) (2) (1) NA		36. (5) (4) (3) (2) (1) NA		46. (5) (4) (3) (2) (1) NA	
7. (5) (4) (3) (2) (1) NA		17. (5) (4) (3) (2) (1) NA		27. (5) (4) (3) (2) (1) NA		37. (5) (4) (3) (2) (1) NA		47. (5) (4) (3) (2) (1) NA	
8. (5) (4) (3) (2) (1) NA		18. (5) (4) (3) (2) (1) NA		28. (5) (4) (3) (2) (1) NA		38. (5) (4) (3) (2) (1) NA		48. (5) (4) (3) (2) (1) NA	
9. (5) (4) (3) (2) (1) NA		19. (5) (4) (3) (2) (1) NA		29. (5) (4) (3) (2) (1) NA		39. (5) (4) (3) (2) (1) NA		49. (5) (4) (3) (2) (1) NA	
10. (5) (4) (3) (2) (1) NA		20. (5) (4) (3) (2) (1) NA		30. (5) (4) (3) (2) (1) NA		40. (5) (4) (3) (2) (1) NA		50. (5) (4) (3) (2) (1) NA	

Comments

Please comment on the quality of the course and instruction.

1. What aspects of the course or the instructor's approach contributed most to your learning?
2. What aspects of the course or the instructor's approach would you change to improve the learning that takes place in the course?
3. Please comment on the instructor's sensitivity to the diversity (for example, political viewpoint, race, ethnicity, national origin, gender, sexual identity and disability) of the students in the class.

Temple University Student Feedback Form - MULTI-INSTRUCTOR



YOUR RATINGS WILL BE ANONYMOUS AND THE INSTRUCTOR WILL NOT RECEIVE FEEDBACK ABOUT THE COURSE UNTIL AFTER ALL GRADES HAVE BEEN SUBMITTED FOR THE SEMESTER.

M1
Multi-Instructor

INTRODUCTION

Temple University is interested in obtaining your feedback about our courses and our faculty. The results of this questionnaire are used by instructors to improve their teaching and course materials. Your responses will also help the faculty and administration make merit, tenure and promotion decisions, as well as other important decisions about how courses are taught at the University. Please be assured that we will treat your responses seriously and confidentially. Thank you for taking the time to complete this questionnaire. (Recommended time: 15 minutes)

USE ONLY A PENCIL OR A DARK BLUE OR BLACK INK PEN - FILL IN RESPONSES COMPLETELY CORRECT: ● INCORRECT: ☒ ☓ ○ ●

Instructor Information

Print the course/instructor information.

DEPARTMENT: _____

COURSE #: _____ SECTION: _____

TODAY'S DATE: ____/____/____

Student Information

Answer each item below if it applies to you and this course.

Before enrolling, my level of interest in the subject matter of this course was

- Low
- Moderate
- High

Expected grade in this course (mark only one)

- | | |
|-------------------------|--------------------------|
| Regular | Medical |
| <input type="radio"/> A | <input type="radio"/> H |
| <input type="radio"/> B | <input type="radio"/> HP |
| <input type="radio"/> C | <input type="radio"/> P |
| <input type="radio"/> D | <input type="radio"/> F |
| <input type="radio"/> F | |

On average, hours per week spent preparing for class and completing course assignments

- | | |
|--------------------------------|-----------------------------------|
| Course was | <input type="radio"/> 8 or more |
| <input type="radio"/> Required | <input type="radio"/> 6 up to 8 |
| <input type="radio"/> Elective | <input type="radio"/> 4 up to 6 |
| | <input type="radio"/> 3 up to 4 |
| | <input type="radio"/> 2 up to 3 |
| | <input type="radio"/> 1 up to 2 |
| | <input type="radio"/> Less than 1 |

General Information for All Courses

Rate each item below using the scale to the left where SA = Strongly Agree and SD = Strongly Disagree. If an item does not apply, select NA (Not Applicable).

Strongly Agree Agree Neutral Disagree Strongly Disagree Not Applicable

SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA

1. I came well prepared for class.
2. The course content was consistent with the educational objectives of this course.
3. The course increased my ability to analyze and critically evaluate ideas, arguments, and points of view.
4. I learned a great deal in this course.

Please comment on the aspects of the course that contributed most to your learning. Are there areas that could be improved?

Use the area below and on the back to rate and write comments about each of the instructors that taught this course.

Instructor 1 -- Please make sure your answers refer to the instructor whose name is designated as the **first** instructor

SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA

1. The instructor clearly explained the educational objectives of this course.
2. The instructor was well organized and prepared for class.
3. The instructor was conscientious in meeting class and office hour responsibilities.
4. The instructor promoted a classroom atmosphere in which I felt free to ask questions.
5. The instructor provided useful feedback about exams, projects, and assignments.
6. So far, the instructor has applied grading policies fairly.
7. The instructor taught this course well.

PRINT INSTRUCTOR 1 NAME HERE _____

Instructor 1 comments

INSTRUCTOR 1

Rate items below using the scale to the left where SA = Strongly Agree and SD = Strongly Disagree. If an item does not apply, select NA (Not Applicable).

Instructor 2 -- Please make sure your answers refer to the instructor whose name is designated as the **second instructor**

SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA

1. The instructor clearly explained the educational objectives of this course.
2. The instructor was well organized and prepared for class.
3. The instructor was conscientious in meeting class and office hour responsibilities.
4. The instructor promoted a classroom atmosphere in which I felt free to ask questions.
5. The instructor provided useful feedback about exams, projects, and assignments.
6. So far, the instructor has applied grading policies fairly.
7. The instructor taught this course well.

PRINT INSTRUCTOR 2 NAME HERE

Instructor 2 comments

INSTRUCTOR 2

Instructor 3 -- Please make sure your answers refer to the instructor whose name is designated as the **third instructor**

SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA

1. The instructor clearly explained the educational objectives of this course.
2. The instructor was well organized and prepared for class.
3. The instructor was conscientious in meeting class and office hour responsibilities.
4. The instructor promoted a classroom atmosphere in which I felt free to ask questions.
5. The instructor provided useful feedback about exams, projects, and assignments.
6. So far, the instructor has applied grading policies fairly.
7. The instructor taught this course well.

PRINT INSTRUCTOR 3 NAME HERE

Instructor 3 comments

INSTRUCTOR 3

Instructor 4 -- Please make sure your answers refer to the instructor whose name is designated as the **fourth instructor**

SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA
SA	A	N	D	SD	NA

1. The instructor clearly explained the educational objectives of this course.
2. The instructor was well organized and prepared for class.
3. The instructor was conscientious in meeting class and office hour responsibilities.
4. The instructor promoted a classroom atmosphere in which I felt free to ask questions.
5. The instructor provided useful feedback about exams, projects, and assignments.
6. So far, the instructor has applied grading policies fairly.
7. The instructor taught this course well.

PRINT INSTRUCTOR 4 NAME HERE

Instructor 4 comments

INSTRUCTOR 4

Additional Items

If you were asked to answer additional items, use the area below. If an item does not apply, select NA (Not Applicable).

High	Low	High	Low	High	Low	High	Low	High	Low
1. (5) (4) (3) (2) (1) (NA)		11. (5) (4) (3) (2) (1) (NA)		21. (5) (4) (3) (2) (1) (NA)		31. (5) (4) (3) (2) (1) (NA)		41. (5) (4) (3) (2) (1) (NA)	
2. (5) (4) (3) (2) (1) (NA)		12. (5) (4) (3) (2) (1) (NA)		22. (5) (4) (3) (2) (1) (NA)		32. (5) (4) (3) (2) (1) (NA)		42. (5) (4) (3) (2) (1) (NA)	
3. (5) (4) (3) (2) (1) (NA)		13. (5) (4) (3) (2) (1) (NA)		23. (5) (4) (3) (2) (1) (NA)		33. (5) (4) (3) (2) (1) (NA)		43. (5) (4) (3) (2) (1) (NA)	
4. (5) (4) (3) (2) (1) (NA)		14. (5) (4) (3) (2) (1) (NA)		24. (5) (4) (3) (2) (1) (NA)		34. (5) (4) (3) (2) (1) (NA)		44. (5) (4) (3) (2) (1) (NA)	
5. (5) (4) (3) (2) (1) (NA)		15. (5) (4) (3) (2) (1) (NA)		25. (5) (4) (3) (2) (1) (NA)		35. (5) (4) (3) (2) (1) (NA)		45. (5) (4) (3) (2) (1) (NA)	
6. (5) (4) (3) (2) (1) (NA)		16. (5) (4) (3) (2) (1) (NA)		26. (5) (4) (3) (2) (1) (NA)		36. (5) (4) (3) (2) (1) (NA)		46. (5) (4) (3) (2) (1) (NA)	
7. (5) (4) (3) (2) (1) (NA)		17. (5) (4) (3) (2) (1) (NA)		27. (5) (4) (3) (2) (1) (NA)		37. (5) (4) (3) (2) (1) (NA)		47. (5) (4) (3) (2) (1) (NA)	
8. (5) (4) (3) (2) (1) (NA)		18. (5) (4) (3) (2) (1) (NA)		28. (5) (4) (3) (2) (1) (NA)		38. (5) (4) (3) (2) (1) (NA)		48. (5) (4) (3) (2) (1) (NA)	
9. (5) (4) (3) (2) (1) (NA)		19. (5) (4) (3) (2) (1) (NA)		29. (5) (4) (3) (2) (1) (NA)		39. (5) (4) (3) (2) (1) (NA)		49. (5) (4) (3) (2) (1) (NA)	
10. (5) (4) (3) (2) (1) (NA)		20. (5) (4) (3) (2) (1) (NA)		30. (5) (4) (3) (2) (1) (NA)		40. (5) (4) (3) (2) (1) (NA)		50. (5) (4) (3) (2) (1) (NA)	

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Temple University Student Feedback Form - LAB SECTIONS



YOUR RATINGS WILL BE ANONYMOUS AND THE INSTRUCTOR WILL NOT RECEIVE FEEDBACK ABOUT THE COURSE UNTIL AFTER ALL GRADES HAVE BEEN SUBMITTED FOR THE SEMESTER.

L1

Labs

INTRODUCTION

Temple University is interested in obtaining your feedback about our courses and our faculty. The results of this questionnaire are used by instructors to improve their teaching and course materials. Your responses will also help the faculty and administration make merit, tenure and promotion decisions, as well as other important decisions about how courses are taught at the University. Please be assured that we will treat your responses seriously and confidentially. Thank you for taking the time to complete this questionnaire. (Recommended time: 15 minutes)

USE ONLY A PENCIL OR A DARK BLUE OR BLACK INK PEN - FILL IN RESPONSES COMPLETELY

CORRECT: ● **INCORRECT:** ✓ ✗ ○ ◐ ◑

Instructor Information

Print the course/instructor information.

DEPARTMENT: _____

COURSE #: _____ SECTION: _____

INSTRUCTOR: _____

TODAY'S DATE: ____/____/____

Student Information

Answer each item below if it applies to you and this course.

Before enrolling, my level of interest in the subject matter of this course was

- Low
- Moderate
- High

Expected grade in this course (mark only one)

- | | |
|-------------------------|--------------------------|
| <u>Regular</u> | <u>Medical</u> |
| <input type="radio"/> A | <input type="radio"/> H |
| <input type="radio"/> B | <input type="radio"/> HP |
| <input type="radio"/> C | <input type="radio"/> P |
| <input type="radio"/> D | <input type="radio"/> F |
| <input type="radio"/> F | |

On average, hours per week spent preparing for class and completing course assignments

- | | |
|--------------------------------|-----------------------------------|
| <u>Course was</u> | <input type="radio"/> 8 or more |
| | <input type="radio"/> 6 up to 8 |
| | <input type="radio"/> 4 up to 6 |
| <input type="radio"/> Required | <input type="radio"/> 3 up to 4 |
| <input type="radio"/> Elective | <input type="radio"/> 2 up to 3 |
| | <input type="radio"/> 1 up to 2 |
| | <input type="radio"/> Less than 1 |

General Information to be Completed for All Lab Sections

Rate each item below using the scale to the left where SA = Strongly Agree and SD = Strongly Disagree. If an item does not apply, select NA (Not Applicable).

Strongly Agree
 Agree
 Neutral
 Disagree
 Strongly Disagree
 Not Applicable

- | | | | | | | |
|----|---|---|---|----|----|---|
| SA | A | N | D | SD | NA | 1. I came well prepared for class. |
| SA | A | N | D | SD | NA | 2. The lab instructor clearly communicated expectations and student responsibilities. |
| SA | A | N | D | SD | NA | 3. The lab instructor was well organized and prepared for the lab. |
| SA | A | N | D | SD | NA | 4. So far, the lab instructor has applied grading policies fairly. |
| SA | A | N | D | SD | NA | 5. The lab instructor helped me learn. |
| SA | A | N | D | SD | NA | 6. The lab instructor was conscientious in meeting class and office hour responsibilities. |
| SA | A | N | D | SD | NA | 7. The lab instructor provided useful feedback regarding assignments. |
| SA | A | N | D | SD | NA | 8. The lab instructor provided helpful guidance in understanding the lab material. |
| SA | A | N | D | SD | NA | 9. The lab instructor helped me develop one or more of the following skills: problem solving, critical thinking, verbal or written communication. |
| SA | A | N | D | SD | NA | 10. The lab instructor thoroughly understands the experiments and/or assignments. |
| SA | A | N | D | SD | NA | 11. The lab instructor made sure that the lab equipment and materials were properly set up at the start of each lab. |
| SA | A | N | D | SD | NA | 12. The lab instructor clearly communicated and enforced safety procedures. |
| SA | A | N | D | SD | NA | 13. The lab instructor taught this lab well. |
| SA | A | N | D | SD | NA | 14. The lab was well integrated with the lecture and/or course material. |
| SA | A | N | D | SD | NA | 15. The lab had adequate facilities in which to perform the experiments and/or assignments. |
| SA | A | N | D | SD | NA | 16. I learned a great deal in this lab. |

Additional Items

If you were asked to answer additional items, use the area below. If an item does not apply, select NA (Not Applicable).

- | | | | | | | | | | |
|------------------|-----|------------------|-----|------------------|-----|------------------|-----|------------------|-----|
| High | Low | High | Low | High | Low | High | Low | High | Low |
| 1. 5 4 3 2 1 NA | | 11. 5 4 3 2 1 NA | | 21. 5 4 3 2 1 NA | | 31. 5 4 3 2 1 NA | | 41. 5 4 3 2 1 NA | |
| 2. 5 4 3 2 1 NA | | 12. 5 4 3 2 1 NA | | 22. 5 4 3 2 1 NA | | 32. 5 4 3 2 1 NA | | 42. 5 4 3 2 1 NA | |
| 3. 5 4 3 2 1 NA | | 13. 5 4 3 2 1 NA | | 23. 5 4 3 2 1 NA | | 33. 5 4 3 2 1 NA | | 43. 5 4 3 2 1 NA | |
| 4. 5 4 3 2 1 NA | | 14. 5 4 3 2 1 NA | | 24. 5 4 3 2 1 NA | | 34. 5 4 3 2 1 NA | | 44. 5 4 3 2 1 NA | |
| 5. 5 4 3 2 1 NA | | 15. 5 4 3 2 1 NA | | 25. 5 4 3 2 1 NA | | 35. 5 4 3 2 1 NA | | 45. 5 4 3 2 1 NA | |
| 6. 5 4 3 2 1 NA | | 16. 5 4 3 2 1 NA | | 26. 5 4 3 2 1 NA | | 36. 5 4 3 2 1 NA | | 46. 5 4 3 2 1 NA | |
| 7. 5 4 3 2 1 NA | | 17. 5 4 3 2 1 NA | | 27. 5 4 3 2 1 NA | | 37. 5 4 3 2 1 NA | | 47. 5 4 3 2 1 NA | |
| 8. 5 4 3 2 1 NA | | 18. 5 4 3 2 1 NA | | 28. 5 4 3 2 1 NA | | 38. 5 4 3 2 1 NA | | 48. 5 4 3 2 1 NA | |
| 9. 5 4 3 2 1 NA | | 19. 5 4 3 2 1 NA | | 29. 5 4 3 2 1 NA | | 39. 5 4 3 2 1 NA | | 49. 5 4 3 2 1 NA | |
| 10. 5 4 3 2 1 NA | | 20. 5 4 3 2 1 NA | | 30. 5 4 3 2 1 NA | | 40. 5 4 3 2 1 NA | | 50. 5 4 3 2 1 NA | |

Continued on back

Comments

Please comment on the quality of the course and instruction.

1. What aspects of the course or the lab instructor's approach contributed most to your learning?
2. What aspects of the course or the lab instructor's approach would you change to improve the learning that takes place in the course?
3. Please comment on the lab instructor's sensitivity to the diversity (for example, political viewpoint, race, ethnicity, gender, national origin, sexual identity, and disability) of the students in the class.

Temple University Student Feedback Form - RECITATION SECTIONS



YOUR RATINGS WILL BE ANONYMOUS AND THE INSTRUCTOR WILL NOT RECEIVE FEEDBACK ABOUT THE COURSE UNTIL AFTER ALL GRADES HAVE BEEN SUBMITTED FOR THE SEMESTER.

R1
Recitations

INTRODUCTION

Temple University is interested in obtaining your feedback about our courses and our faculty. The results of this questionnaire are used by instructors to improve their teaching and course materials. Your responses will also help the faculty and administration make merit, tenure and promotion decisions, as well as other important decisions about how courses are taught at the University. Please be assured that we will treat your responses seriously and confidentially. Thank you for taking the time to complete this questionnaire. (Recommended time: 15 minutes)

USE ONLY A PENCIL OR A DARK BLUE OR BLACK INK PEN - FILL IN RESPONSES COMPLETELY

CORRECT: ● INCORRECT: ✗

Instructor Information

Print the course/instructor information.

DEPARTMENT: _____

COURSE #: _____ SECTION: _____

INSTRUCTOR: _____

TODAY'S DATE: ____/____/____

Student Information

Answer each item below if it applies to you and this course.

Before enrolling, my level of interest in the subject matter of this course was

- Low
- Moderate
- High

Expected grade in this course (mark only one)

- | | |
|-------------------------------|-------------------------------|
| <input type="radio"/> Regular | <input type="radio"/> Medical |
| <input type="radio"/> A | <input type="radio"/> H |
| <input type="radio"/> B | <input type="radio"/> HP |
| <input type="radio"/> C | <input type="radio"/> P |
| <input type="radio"/> D | <input type="radio"/> F |
| <input type="radio"/> F | |

On average, hours per week spent preparing for class and completing course assignments

- | | |
|----------------------------------|-----------------------------------|
| <input type="radio"/> Course was | <input type="radio"/> 8 or more |
| <input type="radio"/> Required | <input type="radio"/> 6 up to 8 |
| <input type="radio"/> Elective | <input type="radio"/> 4 up to 6 |
| | <input type="radio"/> 3 up to 4 |
| | <input type="radio"/> 2 up to 3 |
| | <input type="radio"/> 1 up to 2 |
| | <input type="radio"/> Less than 1 |

General Information to be Completed for All Recitation Sections

Rate each item below using the scale to the left where SA = Strongly Agree and SD = Strongly Disagree. If an item does not apply, select NA (Not Applicable).

Strongly Agree
Agree
Neutral
Disagree
Strongly Disagree
Not Applicable

- | | | | | | | |
|----|---|---|---|----|----|--|
| SA | A | N | D | SD | NA | 1. I came well prepared for class. |
| SA | A | N | D | SD | NA | 2. The recitation instructor clearly communicated expectations and student responsibilities. |
| SA | A | N | D | SD | NA | 3. The recitation instructor was well organized and prepared for the recitation. |
| SA | A | N | D | SD | NA | 4. So far, the recitation instructor has applied grading policies fairly. |
| SA | A | N | D | SD | NA | 5. The recitation instructor helped me learn. |
| SA | A | N | D | SD | NA | 6. The recitation instructor was conscientious in meeting class and office hour responsibilities. |
| SA | A | N | D | SD | NA | 7. The recitation instructor provided useful feedback regarding assignments. |
| SA | A | N | D | SD | NA | 8. The recitation instructor provided helpful guidance in understanding the recitation material. |
| SA | A | N | D | SD | NA | 9. The recitation instructor helped me develop one or more of the following skills: problem solving, critical thinking, verbal or written communication. |
| SA | A | N | D | SD | NA | 10. The recitation instructor effectively facilitated worthwhile discussion. |
| SA | A | N | D | SD | NA | 11. The recitation instructor asked thought-provoking questions. |
| SA | A | N | D | SD | NA | 12. The recitation instructor taught this recitation well. |
| SA | A | N | D | SD | NA | 13. The recitation sessions were well integrated with the lecture and/or course material. |
| SA | A | N | D | SD | NA | 14. The recitation activities helped me to understand the course material. |
| SA | A | N | D | SD | NA | 15. The recitation engaged me in the learning process. |
| SA | A | N | D | SD | NA | 16. I learned a great deal in this recitation. |

Additional Items

If you were asked to answer additional items, use the area below. If an item does not apply, select NA (Not Applicable).

- | | | | | | | | | | |
|------------------|-----|------------------|-----|------------------|-----|------------------|-----|------------------|-----|
| High | Low | High | Low | High | Low | High | Low | High | Low |
| 1. 5 4 3 2 1 NA | | 11. 5 4 3 2 1 NA | | 21. 5 4 3 2 1 NA | | 31. 5 4 3 2 1 NA | | 41. 5 4 3 2 1 NA | |
| 2. 5 4 3 2 1 NA | | 12. 5 4 3 2 1 NA | | 22. 5 4 3 2 1 NA | | 32. 5 4 3 2 1 NA | | 42. 5 4 3 2 1 NA | |
| 3. 5 4 3 2 1 NA | | 13. 5 4 3 2 1 NA | | 23. 5 4 3 2 1 NA | | 33. 5 4 3 2 1 NA | | 43. 5 4 3 2 1 NA | |
| 4. 5 4 3 2 1 NA | | 14. 5 4 3 2 1 NA | | 24. 5 4 3 2 1 NA | | 34. 5 4 3 2 1 NA | | 44. 5 4 3 2 1 NA | |
| 5. 5 4 3 2 1 NA | | 15. 5 4 3 2 1 NA | | 25. 5 4 3 2 1 NA | | 35. 5 4 3 2 1 NA | | 45. 5 4 3 2 1 NA | |
| 6. 5 4 3 2 1 NA | | 16. 5 4 3 2 1 NA | | 26. 5 4 3 2 1 NA | | 36. 5 4 3 2 1 NA | | 46. 5 4 3 2 1 NA | |
| 7. 5 4 3 2 1 NA | | 17. 5 4 3 2 1 NA | | 27. 5 4 3 2 1 NA | | 37. 5 4 3 2 1 NA | | 47. 5 4 3 2 1 NA | |
| 8. 5 4 3 2 1 NA | | 18. 5 4 3 2 1 NA | | 28. 5 4 3 2 1 NA | | 38. 5 4 3 2 1 NA | | 48. 5 4 3 2 1 NA | |
| 9. 5 4 3 2 1 NA | | 19. 5 4 3 2 1 NA | | 29. 5 4 3 2 1 NA | | 39. 5 4 3 2 1 NA | | 49. 5 4 3 2 1 NA | |
| 10. 5 4 3 2 1 NA | | 20. 5 4 3 2 1 NA | | 30. 5 4 3 2 1 NA | | 40. 5 4 3 2 1 NA | | 50. 5 4 3 2 1 NA | |

Temple University Student Feedback Form - PERFORMANCE- OR STUDIO-BASED COURSES



YOUR RATINGS WILL BE ANONYMOUS AND THE INSTRUCTOR WILL NOT RECEIVE FEEDBACK ABOUT THE COURSE UNTIL AFTER ALL GRADES HAVE BEEN SUBMITTED FOR THE SEMESTER.

P1
Performance

INTRODUCTION

Temple University is interested in obtaining your feedback about our courses and our faculty. The results of this questionnaire are used by instructors to improve their teaching and course materials. Your responses will also help the faculty and administration make merit, tenure and promotion decisions, as well as other important decisions about how courses are taught at the University. Please be assured that we will treat your responses seriously and confidentially. Thank you for taking the time to complete this questionnaire. (Recommended time: 15 minutes)

USE ONLY A PENCIL OR A DARK BLUE OR BLACK INK PEN - FILL IN RESPONSES COMPLETELY CORRECT: ● INCORRECT: ✓✗○●

Course/Instructor Information

Print the course/instructor information.

DEPARTMENT: _____

COURSE #: _____ SECTION: _____

INSTRUCTOR: _____

TODAY'S DATE: ____/____/____

Student Information

Answer each item below if it applies to you and this course.

Before enrolling, my level of interest in the subject matter of this course was	Expected grade in this course (mark only one)	On average, hours per week spent preparing for class and completing course assignments
<input type="radio"/> Low <input type="radio"/> Moderate <input type="radio"/> High	Regular Medical <input type="radio"/> A <input type="radio"/> H <input type="radio"/> B <input type="radio"/> HP <input type="radio"/> C <input type="radio"/> P <input type="radio"/> D <input type="radio"/> F <input type="radio"/> F	<input type="radio"/> 8 or more <input type="radio"/> 6 up to 8 <input type="radio"/> 4 up to 6 <input type="radio"/> 3 up to 4 <input type="radio"/> 2 up to 3 <input type="radio"/> 1 up to 2 <input type="radio"/> Less than 1
	Course was	
	<input type="radio"/> Required <input type="radio"/> Elective	

General Information to be Completed for All Performance- or Studio-Based Courses.

Rate each item below using the scale to the left where SA = Strongly Agree and SD = Strongly Disagree. If an item does not apply, select NA (Not Applicable).

Strongly Agree Agree Neutral Disagree Strongly Disagree Not Applicable

SA A N D SD NA

- I came well prepared for class.
- The instructor suggested or demonstrated effective techniques to help with performances and assignments.
- The instructor/conductor was well organized and prepared.
- The instructor was conscientious in meeting rehearsal/studio and office hour responsibilities.
- The instructor helped me grow and develop as a designer, artist or performer.
- So far, the instructor/conductor has applied grading policies fairly.
- The instructor taught this course well.
- The content and material in this course were varied and challenging.
- The content of the course was at an appropriate level of difficulty.
- I learned a great deal in this performance- or studio-based course.

Additional Items

If you were asked to answer additional items, use the area below. If an item does not apply, select NA (Not Applicable).

High Low	High Low	High Low	High Low	High Low
1. (5) (4) (3) (2) (1) NA	11. (5) (4) (3) (2) (1) NA	21. (5) (4) (3) (2) (1) NA	31. (5) (4) (3) (2) (1) NA	41. (5) (4) (3) (2) (1) NA
2. (5) (4) (3) (2) (1) NA	12. (5) (4) (3) (2) (1) NA	22. (5) (4) (3) (2) (1) NA	32. (5) (4) (3) (2) (1) NA	42. (5) (4) (3) (2) (1) NA
3. (5) (4) (3) (2) (1) NA	13. (5) (4) (3) (2) (1) NA	23. (5) (4) (3) (2) (1) NA	33. (5) (4) (3) (2) (1) NA	43. (5) (4) (3) (2) (1) NA
4. (5) (4) (3) (2) (1) NA	14. (5) (4) (3) (2) (1) NA	24. (5) (4) (3) (2) (1) NA	34. (5) (4) (3) (2) (1) NA	44. (5) (4) (3) (2) (1) NA
5. (5) (4) (3) (2) (1) NA	15. (5) (4) (3) (2) (1) NA	25. (5) (4) (3) (2) (1) NA	35. (5) (4) (3) (2) (1) NA	45. (5) (4) (3) (2) (1) NA
6. (5) (4) (3) (2) (1) NA	16. (5) (4) (3) (2) (1) NA	26. (5) (4) (3) (2) (1) NA	36. (5) (4) (3) (2) (1) NA	46. (5) (4) (3) (2) (1) NA
7. (5) (4) (3) (2) (1) NA	17. (5) (4) (3) (2) (1) NA	27. (5) (4) (3) (2) (1) NA	37. (5) (4) (3) (2) (1) NA	47. (5) (4) (3) (2) (1) NA
8. (5) (4) (3) (2) (1) NA	18. (5) (4) (3) (2) (1) NA	28. (5) (4) (3) (2) (1) NA	38. (5) (4) (3) (2) (1) NA	48. (5) (4) (3) (2) (1) NA
9. (5) (4) (3) (2) (1) NA	19. (5) (4) (3) (2) (1) NA	29. (5) (4) (3) (2) (1) NA	39. (5) (4) (3) (2) (1) NA	49. (5) (4) (3) (2) (1) NA
10. (5) (4) (3) (2) (1) NA	20. (5) (4) (3) (2) (1) NA	30. (5) (4) (3) (2) (1) NA	40. (5) (4) (3) (2) (1) NA	50. (5) (4) (3) (2) (1) NA

**Comments**

Please comment on the quality of the course and instruction.

1. What aspects of the course or the instructor's approach contributed most to your learning?
2. What aspects of the course or the instructor's approach would you change to improve the learning that takes place in the course?
3. Please comment on the instructor's sensitivity to the diversity (for example, political viewpoint, race, ethnicity, national origin, gender, sexual identity and disability) of the students in the class.