

STUDENT COURSE EVALUATION FORM

Course Code & Title: _____

Degree: _____ Annual: _____ Semester: _____

Department: _____

Name of Instructor: _____ Date: _____

Encircle the choice

Sr. No.	Statements	Poor	Fair	Good	Very Good	Excellent
1	Course was well structured to achieve the learning outcomes	1	2	3	4	5
2	Course stimulated your interest and taught on the subject area	1	2	3	4	5
3	Course material is updated	1	2	3	4	5
4	The syllabus clearly states course objectives, requirements and procedures	1	2	3	4	5
5	The content presented in the course has increased my knowledge of the subject	1	2	3	4	5
6	Study material was useful	1	2	3	4	5
7	Ideas and concepts were presented clearly	1	2	3	4	5
8	Facilities in class room/lab were adequate	1	2	3	4	5
9	Learning resources in the class were adequate and appropriate	1	2	3	4	5
10	The assignments, quizzes and exams covered the materials presented in the course	1	2	3	4	5
11	Course teaching plan was presented and explained by teacher in the first week	1	2	3	4	5
12	Course outline was amply covered	1	2	3	4	5
13	Learning outcomes were explained in appropriate manner.	1	2	3	4	5
14	The tutor dealt effectively with your problems	1	2	3	4	5

Suggestion(s) for the Improvement of the Course
