Clemson University
Questionnaire for Student Assessment of Instructors

Please fill in the following information:
Department ____________________________
Course Number _________________________
Course Section _________________________
Semester _____________________________
Year _________________________________

Please write the instructor's five digit code number and fill in the circles in the box to the right.

The course and instructor
1. The instructor clearly communicated what I was expected to learn.
2. The instructor made the relevance of the course material clear.
3. The course was well organized.
4. There was a positive interaction between the class and the instructor.
5. The instructor's teaching methods helped me understand the course material.
6. The instructor's verbal communication skills helped me understand the course material.
7. The instructor clearly explained what was expected in assignments and tests.
8. The instructor kept me informed about my progress in the course.
9. The feedback I received on assignments and tests gave me the opportunity to improve my performance.
10. Overall, the instructor is an effective teacher.
11. The instructor's grading procedures gave a fair evaluation of my understanding of the material.
12. How much work did you put into this course relative to your other courses?
13. How difficult was this course for you relative to your other courses?
14. To what extent was this course a requirement for you?
15. Was this course in your major?
16. Was this course team-taught?

Department Developed Questions
17. __________________________
18. __________________________
19. __________________________
20. __________________________
21. __________________________
22. __________________________
23. __________________________
24. __________________________
25. __________________________
26. __________________________

Instructor Optional Questions
27. __________________________
28. __________________________
29. __________________________
30. __________________________
31. __________________________

32. Please indicate your satisfaction with the availability of the instructor outside the classroom by choosing one response from the scale. In selecting your rating, consider the instructor's availability via established office hours, appointments, and other opportunities for face-to-face interaction as well as via telephone, email, fax and other means.

Please turn this sheet over for written response questions.
Your instructor will receive this form as is. The form will not be returned until AFTER final grades have been assigned. Please make your feedback as specific and as constructive as possible.

33. Please comment on the strengths of the instructor and the course.
   i) Strength:__________________________________________________________
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34. Please comment on the weaknesses of the instructor and the course.
   i) Weakness:__________________________________________________________
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35. Please comment on any teaching methods you found particularly helpful, and suggest alternative methods that you feel would improve the course.
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36. I would recommend this instructor to a friend. Y/N Why?
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