



CHAPMAN UNIVERSITY SYSTEM

STUDENT EVALUATION

CLASS: _____ INSTRUCTOR: _____ DATE: _____

Mark only one of the categories for each of the following statements to the extent that you agree or disagree as it relates to your instructor. If the statement is not appropriate for this instructor or class, or you have no basis for rating the instructor on this item, be sure to mark "n/o" for no opinion.

Strongly Disagree= 1 Disagree= 2 Neutral= 3 Agree= 4 Strongly Agree= 5 No Opinion= n/o

1.	Treated students with respect.	1	2	3	4	5	n/o
2.	Based grades on appropriate assignments or projects.	1	2	3	4	5	n/o
3.	Encouraged student participation by means of questions, discussion, and/or other class projects.	1	2	3	4	5	n/o
4.	Showed interest in students.	1	2	3	4	5	n/o
5.	Was enthusiastic about subject.	1	2	3	4	5	n/o
6.	Was clear about the basis for grading at the beginning of the courses.	1	2	3	4	5	n/o
7.	Planned each class session well.	1	2	3	4	5	n/o
8.	Gave assignments which helped me learn.	1	2	3	4	5	n/o
9.	Stimulated my interest in the subject.	1	2	3	4	5	n/o
10.	Instructor was knowledgeable in subject area.	1	2	3	4	5	n/o

Please use reverse side for comments.