JOHN A. LOGAN COLLEGE
COMMUNITY EDUCATION COURSE EVALUATION

Class ___________________________  Instructor ___________________________
Location _________________________  Date _________________________________

Instructions:

Please assist us in our program improvement efforts by rating and evaluating the Community Education course in which you are currently enrolled through John A. Logan College. Rate each item using a scale of 5 to 1 with 5 being the highest and 1 being the lowest. (Circle your choice on each item.) The contents of this form will be kept confidential and used only for the improvement of instruction and courses.

5 4 3 2 1 Were course goals and objectives clearly stated before instruction began?

5 4 3 2 1 Did the instructor have a good knowledge of the subject matter?

5 4 3 2 1 Was the instructor present and on time for all class sessions?

5 4 3 2 1 Was the instructor able to communicate subject material effectively?

5 4 3 2 1 Did the instructor help you to understand difficult concepts?

5 4 3 2 1 Did the instructor seem to be sensitive to the needs of all the students regardless of their abilities?

5 4 3 2 1 Did the content of the course conform to the published description of it?

5 4 3 2 1 Was the course an enjoyable experience for you?

5 4 3 2 1 How would you rate the overall quality of this Community Education course?

5 4 3 2 1 Would you recommend this course to someone else you know?

1. What suggestions or recommendations would you make to improve this course? ____________________________

2. Are there any new courses you would like to see offered in our Community Education program?

3. Do you know of any instructors who might be willing to teach the courses in our existing curriculum or the new courses that you listed in #2 above? ____________________________
4. Did you like the course? If you answer no to any of the following questions, please explain.

Length _____ Yes _____ No ________________________________
Time _____ Yes _____ No ________________________________
Location _____ Yes _____ No ________________________________

5. Please list the days of the week you would prefer to take a class.

First Choice __________ Second Choice __________ Third Choice __________

6. What are the best times in the evening for you to take a course?

_____ 4:00-6:00 P.M. _____ 5:00-7:00 P.M. _____ 6:00-8:00 P.M.
_____ 7:00-9:00 P.M. _____ 8:00-10:00 P.M.

7. Was the system for registering for your class convenient? If no, please offer suggestions as to how we can improve?

_____ Yes _____ No ________________________________

8. Which radio station do you most frequently listen to? ____________________________

9. Which television station do you most frequently watch? ____________________________

10. How did you hear about this class? (Please check one.)

_____ JALC Community Education brochure _____ Radio commercial
_____ Listing of classes in newspaper _____ Press release in newspaper
_____ Community Coordinator _____ Friend _____ Other

Thank You For Making Our Community Education program a success!

Barry R. Hancock
Dean for Community Education

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