

Student Feedback Survey

1. How satisfied are you with your current learning in my class?

Circle one number: 0 = completely dissatisfied; 10 = completely satisfied

1 2 3 4 5 6 7 8 9 10

2. Thinking about my classroom teaching, fill in the blank: It would be helpful for me if my teacher spent:

MORE TIME:

LESS TIME:

3. With respect to homework and other assignments for completion outside class time, circle one:

- A. I complete every assignment on time
- B. I complete most assignments on time
- C. I complete very few assignments on time
- D. I complete almost no assignments on time

4. Give a detailed reason for your answer to #3:

5. What things about my teaching, our procedures, our classroom, our assignments, etc. are satisfactory and what needs improvement? Please be as specific as you can!

TEACHING:

PROCEDURES:

CLASSROOM:

ASSIGNMENTS:

ASSESSMENTS:

6. What can I do to help YOU reach your goals for my class? Here is your opportunity to reflect on your particular needs so that I can improve!
