

Brookline Adult & Community Education Course and Program Evaluation Form 2011-2012

We ask you to take a few moments to complete the following evaluation form. Its purpose is to help the instructor of this course and BA&CE staff to improve the quality of each course and the overall program by understanding the needs of our students. Thank you for your help.

Title of Course: _____ Course Code _____

Instructor's Name: _____

Semester: Fall Winter Spring Summer Year: _____

Please indicate your agreement with the following statements:

Relating to the Course	Strongly Agree	Agree	Disagree	Strongly Disagree
The curriculum was well planned & organized.	1	2	3	4
The course objectives were clearly defined.	1	2	3	4
The course met my expectations.	1	2	3	4
The course was the appropriate level of difficulty.	1	2	3	4
The course enriched my understanding of the topic.	1	2	3	4
I would recommend this course to others.	1	2	3	4

What I liked best about this course:

What I liked least about this course:

Do you have any suggestions for this course or instructor?

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Please indicate your agreement with the following statements:

Relating to the Instructor	Strongly Agree	Agree	Disagree	Strongly Disagree
The instructor was organized and communicated clearly.	1	2	3	4
The instructor was knowledgeable.	1	2	3	4
The instructor started and ended class on time.	1	2	3	4
The instructor was available for questions and was helpful to students.	1	2	3	4
I would recommend this instructor to others.	1	2	3	4

For marketing and planning purposes, please tell us a little about yourself:

Male Female

Age Range:

17-30 30-45 45-65 65+

Highest Level of Education:

High School Some College Undergraduate Degree Graduate Degree or Higher

City or Town of Residence: _____

How did you learn about your course at Brookline Adult Education?

Received a catalog in the mail Saw the course listed on the BA&CE website
 Picked up a catalog from a street box Picked up a catalog in a store
 Other _____

Number of Brookline Adult & Community Education classes you've taken:

New student this term 1-2 classes 3-5 classes 5+ classes

Do you have suggestions for future courses or lectures you would like to see?

Additional comments, if any:

Please return this form to Brookline High School, Room 100 or mail to:
Brookline Adult and Community Education, P.O. Box 150, Brookline, MA 02446.
Thank you!