



58289

Bowdoin College Student Opinion of Teaching and Course

Department _____ Course No _____ Instructor _____

Class ID

Please answer the questions below by filling in the circle under the number of your response and commenting in the spaces provided. Your responses will be used for course improvement and as part of the process for making decisions on reappointment, promotion, tenure, and merit pay increases for all faculty. These opinion surveys will be available to the instructor only after final grades have been submitted to the Registrar. If you need more space, please continue your comments on the reverse side.

Fill in one circle only; half-point ratings not accepted.

1. **How much did this course contribute to your education?** *Consider such questions as: How much did you learn? Did you grow intellectually? Were you challenged? Did the course expose you to new ideas, perspectives, information? Has the course helped you develop skills?*

Very little					Very much
1	2	3	4	5	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

2. **How effectively did the instructor make use of class sessions to advance your learning?** *Please give specific examples.*

Not effectively					Very effectively
1	2	3	4	5	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3. **How helpful to your learning was the feedback you received in the course?** *Consider such coursework as papers, problem sets, presentations and exams.*

Not helpful					Very helpful
1	2	3	4	5	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. **Did you communicate with the instructor outside of class?**

Yes	<input type="radio"/>	No	<input type="radio"/>
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IF YES, how helpful to your learning were these communications with the instructor?

Not helpful					Very helpful
1	2	3	4	5	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. **How accessible was the instructor outside of class (i.e., by email, office hours, etc.)?**

Not accessible					Very accessible
1	2	3	4	5	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

6. **What is your overall rating of the instructor as a teacher?** *Please comment on the qualities that are the basis for your rating.*

Very low					Very high
1	2	3	4	5	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

PLEASE CONTINUE ON OTHER SIDE

7. **What did you like best about the course? What suggestions would you offer?** *Please consider course structure such as the nature of assignments, selection of course materials, organization, and pace of the course.*

8. **Please describe your own level of effort in this course.**