

TEACHER/CLASS EVALUATION FORM

Instructor: XXXXXXXXXX

Course: BIO104

Date: 4.4.2012

Time: 1 PM

Term: Sp 2012

RATING SCALE:

4- High

3- Medium

2- Low

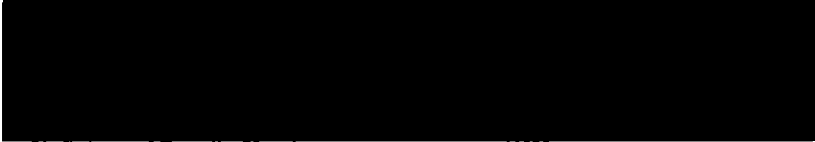
1- Very Low

| Activity:Boardwork/lecture | | Rating | | | | Comments: Tissue Types |
|----------------------------|------------------------------------|--------|---|---|---|---|
| | | 4 | 3 | 2 | 1 | |
| 1 | Appropriateness of activity | x | | | | appropriate |
| 2 | Apparent subject knowledge | x | | | | appropriate |
| 3 | Speech and expression clarity | x | | | | clear |
| 4 | Voice quality and enunciation | x | | | | Easily heard |
| 5 | Vocabulary and usage | x | | | | Appropriate – review terminology when necessary |
| 6 | Use of board/audio-visual aids | x | | | | Notes and diagrams on the board |
| 7 | Use of class discussion | | | x | | No discussion, lecture and notes |
| 8 | Demonstrated class interest | | x | | | Very engaged |
| 9 | Evidence of preparation | x | | | | prepared |
| 10 | Rapport with students | | x | | | good |
| 11 | Ability to explain material | | x | | | good |
| 12 | Instruction technique variety | | x | | | Limited in the time of my visit |
| 13 | Apparent enthusiasm for subject | | x | | | good |
| 14 | Management of classroom activities | | x | | | |
| 15 | Other | | x | | | |
| 16 | Overall Rating | x | | | | Overall, for the time I visited, instructor did a good job. |

Susan McCallum 4.4.2012

Evaluator's Signature

Date



Signature of Faculty Member

Date

Earl Cook 4/4/12

Signature of Dean of Instruction

Date

cc: Dean

Division Chair

Faculty