

**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?

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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!**

Jo Dick  
 Coordinator for Community Education