

## Course Evaluation

Name: \_\_\_\_\_

Below are a series of statements. Please respond by **circling** the number you feel most reflects your opinion. ***If you have any comment please fell free to specify it. You can comment in Arabic.***

	Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree
The course satisfied my own needs and expectations <b><u>Comment:</u></b>	5	4	3	2	1
The content was presented at a level which could be understood <b><u>Comment:</u></b>	5	4	3	2	1
Course logically progress from one point to another <b><u>Comment:</u></b>	5	4	3	2	1
I was motivated to learn <b><u>Comment:</u></b>	5	4	3	2	1
Course materials & texts helped to learn <b><u>Comment:</u></b>	5	4	3	2	1
Lecture was interesting <b><u>Comment:</u></b>	5	4	3	2	1
Lecture was useful <b><u>Comment:</u></b>	5	4	3	2	1
I feel I contributed to lecture discussion <b><u>Comment:</u></b>	5	4	3	2	1
Workload was comparable to other courses <b><u>Comment:</u></b>	5	4	3	2	1

**Lab Evaluation: TA Name:**

I feel I contributed to lab discussion 5 4 3 2 1

**Comment:**

The teaching methods used helped me learn effectively 5 4 3 2 1

**Comment:**

Lab was interesting 5 4 3 2 1

**Comment:**

Lab was useful 5 4 3 2 1

**Comment:**

The Lab satisfied my own needs and expectations 5 4 3 2 1

**Comment:**

Your TA prepare well for his subject 5 4 3 2 1

**Comment:**

Your TA achieved a good relation with the group 5 4 3 2 1

**Comment:**

TA is available for consultation 5 4 3 2 1

**Comment:**

**About you**

You attend your lecture frequently 5 4 3 2 1

**Comment:**

You attend your lab frequently 5 4 3 2 1

**Comment:**

Reasons for taking the course:

Which aspects of the course worked well? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Which aspects of the course worked badly? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How could the course be improved? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Would you recommend this course to others? If not, please outline your reasons. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Any other comments,  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

***Thank you very much for taking the time to complete this form. Your input is an integral part of the evaluation and course enhancement.***