Peer Assessment Feedback Form

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| **Student Trainer’s Name:** |  |
| **Peer (print name, sign and date)**  [anonymous feedback is allowed] |  |
| **Software Engineering Master Class F21SM2** | |
| **Questions** | **Comments** |
| What did you like about the teaching material? |  |
| What did you like about the trainer’s approach? |  |
| What have you learned? |  |
| Is there any aspect that you would have liked to include in your own teaching? |  |
| What could have been improved? |  |
| General Comments: | |