

Condensed Item Analysis Report

EVAL-Spring18- Gurajala CIS 410

Rate the level of your participation in this course.

Response	Frequency	Percent	Mean: 3.00
Very Active	0	0.00	
Moderate+	3	17.65	
Moderate	11	64.71	
Moderate-	3	17.65	
Not Active	0	0.00	
Missing	0	0.00	

What overall rating would you give yourself as a student in this course?

Response	Frequency	Percent	Mean: 2.76
Excellent	0	0.00	
Good	9	52.94	
Adequate	4	23.53	
Poor	3	17.65	
Very Poor	1	5.88	
Missing	0	0.00	

The instructor demonstrates competence in the subject area.

Response	Frequency	Percent	Mean: 1.29
Strongly Agree	12	70.59	
Agree	5	29.41	
Neutral	0	0.00	
Disagree	0	0.00	
Strongly Disagree	0	0.00	
Missing	0	0.00	

The Instructor's teaching is effective.

Response	Frequency	Percent	Mean: 1.76
Strongly Agree	9	52.94	
Agree	3	17.65	
Neutral	5	29.41	
Disagree	0	0.00	
Strongly Disagree	0	0.00	
Missing	0	0.00	

The instructor is concerned with student's progress in the course.

Response	Frequency	Percent	Mean: 1.59
Strongly Agree	9	52.94	
Agree	6	35.29	
Neutral	2	11.76	
Disagree	0	0.00	
Strongly Disagree	0	0.00	
Missing	0	0.00	

The instructor is available to students outside of class.

Response	Frequency	Percent	Mean: 1.47
Strongly Agree	9	52.94	
Agree	8	47.06	
Neutral	0	0.00	
Disagree	0	0.00	
Strongly Disagree	0	0.00	
Missing	0	0.00	

Examinations relate well to the stated course objective.

Response	Frequency	Percent	Mean: 1.53
Strongly Agree	11	64.71	
Agree	3	17.65	
Neutral	3	17.65	
Disagree	0	0.00	
Strongly Disagree	0	0.00	
Missing	0	0.00	

The work required in this course relates well to the stated course objective.

Response	Frequency	Percent	Mean: 1.47
Strongly Agree	11	64.71	
Agree	4	23.53	
Neutral	2	11.76	
Disagree	0	0.00	
Strongly Disagree	0	0.00	
Missing	0	0.00	

Condensed Item Analysis Report

EVAL-Spring18- Gurajala CIS 410

What is your Gender?

Response	Frequency	Percent	Mean: 1.14
Male	12	70.59	
Female	2	11.76	
Missing	3	17.65	

What is the reason for taking the course?

Response	Frequency	Percent	Mean: 1.19
Major-required	13	76.47	
Major-elective	3	17.65	
Minor-required	0	0.00	
Minor-elective	0	0.00	
General Education Requirement	0	0.00	
Free Elective	0	0.00	
Missing	1	5.88	

What is your class year?

Response	Frequency	Percent	Mean: 3.19
Freshman	0	0.00	
Sophomore	3	17.65	
Junior	7	41.18	
Senior	6	35.29	
Graduate	0	0.00	
Other	0	0.00	
Missing	1	5.88	

What is your expected grade?

Response	Frequency	Percent	Mean: 4.94
4.0	0	0.00	
3.7	1	5.88	
3.3	4	23.53	
3.0	3	17.65	
2.7	2	11.76	
2.3	2	11.76	
2.0	3	17.65	
1.7	0	0.00	
1.3	0	0.00	
1.0	1	5.88	
0.0	0	0.00	
S	0	0.00	
U	0	0.00	
Missing	1	5.88	

I attended class:

Response	Frequency	Percent	Mean: 1.94
Always	7	41.18	
Frequently	4	23.53	
Moderately	6	35.29	
Occasionally	0	0.00	
Rarely	0	0.00	
Missing	0	0.00	







How many hours outside of class did you devote to this course on average per week?

Response	Frequency	Percent	Mean: 3.35
9+	0	0.00	
6-8	3	17.65	
4-5	5	29.41	
2-3	9	52.94	
0-1	0	0.00	
Missing	0	0.00	







Condensed Item Analysis Report

EVAL-Spring18- Gurajala CIS 410







The instructor evaluates students performance fairly.

Response	Frequency	Percent	Mean: 1.35
Strongly Agree	12	70.59	
Agree	4	23.53	
Neutral	1	5.88	
Disagree	0	0.00	
Strongly Disagree	0	0.00	
Missing	0	0.00	

I learned a great deal in this course.

Response	Frequency	Percent	Mean: 1.71
Strongly Agree	9	52.94	
Agree	5	29.41	
Neutral	2	11.76	
Disagree	1	5.88	
Strongly Disagree	0	0.00	
Missing	0	0.00	

Overall rating of instructor

Response	Frequency	Percent	Mean: 1.38
Excellent	10	58.82	
Good	6	35.29	
Adequate	0	0.00	
Poor	0	0.00	
Very Poor	0	0.00	
Missing	1	5.88	



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STUDENT OPINION OF FACULTY INSTRUCTION

Please share your honest reactions about this course. We appreciate the time you will take to respond to this evaluation. All responses will be carefully considered and kept confidential. Responses will not be read until after final grades have been submitted.

CIS 410
Course Subject and Number

computer networks
Course Title

Supraja Gutajala
Instructor

spring 2018
Semester and Year

INSTRUCTIONS

- Do NOT use ink or ballpoint pen.
- Completely fill circle with dark mark.
- Cleanly erase any answers you wish to change.



No. 2 Pencil Only

RIGHT MARK



WRONG MARKS



DEMOGRAPHIC QUESTIONS

Gender:

- ☒ Male
☐ Female

Reason for taking the course (complete all that apply):

- ☒ Major-required
☐ Major-elective
☐ Minor-required
☐ Minor-elective
☐ General Education Requirement
☐ Free Elective

Class Year:

- ☐ Freshman
☐ Sophomore
☒ Junior
☐ Senior
☐ Graduate
☐ Other

STUDENT SELF-EVALUATION QUESTIONS

Optional Items

Expected grade:

4.0 3.7 3.3 3.0 2.7 2.3 2.0 1.7 1.3 1.0 0.0 | S U
☐ ☒ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

I attended class:

Always Frequently Moderately Occasionally Rarely
☐ ☒ ☐ ☐ ☐

How many hours outside of class did you devote to this course on average per week?

9+ 6-8 4-5 2-3 0-1
☐ ☐ ☐ ☒ ☐

Rate the level of your participation in this course.

Very active Moderate Not active
☐ ☒ ☐ ☐

What overall rating would you give yourself as a student in this course?

Excellent Good Adequate Poor Very Poor
☐ ☒ ☐ ☐ ☐

A. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

B. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

C. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

D. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

E. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

F. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

G. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

H. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

I. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

J. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

INSTRUCTOR EVALUATION QUESTIONS

Please rate the instructor on a 1–5 scale for each of the numbered questions or indicate that it does not apply.

1. The instructor demonstrates competence in the subject area.
2. The instructor's teaching is effective.
3. The instructor is concerned with students' progress in the course.
4. The instructor is available to students outside of class.
5. Examinations relate well to the stated course objectives.
6. The work required in this course relates well to the stated course objectives.
7. The instructor evaluates student performance fairly.
8. I learned a great deal in this course.

Does not apply	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="radio"/>	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	
<input type="radio"/>	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	
<input type="radio"/>	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	
<input type="radio"/>	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	
<input type="radio"/>	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	
<input type="radio"/>	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	
<input type="radio"/>	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	
<input type="radio"/>	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	

OVERALL RATING OF INSTRUCTOR

Excellent

Good

Adequate

Poor

Very Poor



GENERAL COMMENTS

THE COURSE: Please comment on course content, requirements or any other aspect of the course.

THE INSTRUCTOR: Please comment on the strengths and weakness of the instructor. Would you take another course from this instructor?

Yes!

Thank you!



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STUDENT OPINION OF FACULTY INSTRUCTION

Please share your honest reactions about this course. We appreciate the time you will take to respond to this evaluation. All responses will be carefully considered and kept confidential. Responses will not be read until after final grades have been submitted.

CIS 410
Course Subject and Number

Computer networks
Course Title

Supraja Gurajala
Instructor

Spring 18
Semester and Year

INSTRUCTIONS

- Do NOT use ink or ballpoint pen.
- Completely fill circle with dark mark.
- Cleanly erase any answers you wish to change.



No. 2 Pencil Only

RIGHT MARK

WRONG MARKS



DEMOGRAPHIC QUESTIONS

Gender:

- ☒ Male
☐ Female

Reason for taking the course (complete all that apply):

- ☒ Major-required
☐ Major-elective
☐ Minor-required
☐ Minor-elective
☐ General Education Requirement
☐ Free Elective

Class Year:

- ☐ Freshman
☐ Sophomore
☒ Junior
☐ Senior
☐ Graduate
☐ Other

STUDENT SELF-EVALUATION QUESTIONS

Optional Items

Expected grade:

4.0 3.7 3.3 3.0 2.7 2.3 2.0 1.7 1.3 1.0 0.0 S U
☐ ☐ ☐ ☐ ☐ ☐ ☒ ☐ ☐ ☐ ☐ ☐ ☐ ☐

I attended class:

Always Frequently Moderately Occasionally Rarely
☐ ☐ ☒ ☐ ☐

How many hours outside of class did you devote to this course on average per week?

9+ 6-8 4-5 2-3 0-1
☐ ☐ ☒ ☐ ☐

Rate the level of your participation in this course.

Very active Moderate Not active
☐ ☐ ☒ ☐ ☐

What overall rating would you give yourself as a student in this course?

Excellent Good Adequate Poor Very Poor
☐ ☐ ☒ ☐ ☐

A. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

B. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

C. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

D. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

E. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

F. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

G. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

H. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

I. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

J. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

INSTRUCTOR EVALUATION QUESTIONS

Please rate the instructor on a 1–5 scale for each of the numbered questions or indicate that it does not apply.

1. The instructor demonstrates competence in the subject area.
2. The instructor's teaching is effective.
3. The instructor is concerned with students' progress in the course.
4. The instructor is available to students outside of class.
5. Examinations relate well to the stated course objectives.
6. The work required in this course relates well to the stated course objectives.
7. The instructor evaluates student performance fairly.
8. I learned a great deal in this course.

Does not apply	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="radio"/>	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5

OVERALL RATING OF INSTRUCTOR

Excellent	Good	Adequate	Poor	Very Poor
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

GENERAL COMMENTS

THE COURSE: Please comment on course content, requirements or any other aspect of the course.

THE INSTRUCTOR: Please comment on the strengths and weakness of the instructor. Would you take another course from this instructor?

Thank you!



STUDENT OPINION OF FACULTY INSTRUCTION

Please share your honest reactions about this course. We appreciate the time you will take to respond to this evaluation. All responses will be carefully considered and kept confidential. Responses will not be read until after final grades have been submitted.

Course Subject and Number

Instructor

Course Title

Semester and Year

CIS 410
Supraja Gurajala

Computer networks
Spring 2018

INSTRUCTIONS

- Do NOT use ink or ballpoint pen.
- Completely fill circle with dark mark.
- Cleanly erase any answers you wish to change.



No. 2 Pencil Only

RIGHT MARK

WRONG MARKS



DEMOGRAPHIC QUESTIONS

Gender:

- ☐ Male
☐ Female

Reason for taking the course (complete all that apply):

- ☐ Major-required
☐ Major-elective
☐ Minor-required
☐ Minor-elective
☐ General Education Requirement
☐ Free Elective

Class Year:

- ☐ Freshman
☐ Sophomore
☒ Junior
☐ Senior
☐ Graduate
☐ Other

STUDENT SELF-EVALUATION QUESTIONS

Optional Items

Expected grade:

4.0 3.7 3.3 3.0 2.7 2.3 2.0 1.7 1.3 1.0 0.0 | S U
☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

I attended class:

Always Frequently Moderately Occasionally Rarely
☐ ☒ ☐ ☐ ☐

How many hours outside of class did you devote to this course on average per week?

9+ 6-8 4-5 2-3 0-1
☐ ☐ ☐ ☒ ☐

Rate the level of your participation in this course.

Very active Moderate Not active
☐ ☐ ☐ ☒ ☐

What overall rating would you give yourself as a student in this course?

Excellent Good Adequate Poor Very Poor
☐ ☐ ☒ ☐ ☐

A. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

B. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

C. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

D. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

E. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

F. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

G. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

H. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

I. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

J. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

INSTRUCTOR EVALUATION QUESTIONS

Please rate the instructor on a 1–5 scale for each of the numbered questions or indicate that it does not apply.

1. The instructor demonstrates competence in the subject area.
2. The instructor's teaching is effective.
3. The instructor is concerned with students' progress in the course.
4. The instructor is available to students outside of class.
5. Examinations relate well to the stated course objectives.
6. The work required in this course relates well to the stated course objectives.
7. The instructor evaluates student performance fairly.
8. I learned a great deal in this course.

Does not apply	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5

OVERALL RATING OF INSTRUCTOR

Excellent	Good	Adequate	Poor	Very Poor
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

GENERAL COMMENTS

THE COURSE: Please comment on course content, requirements or any other aspect of the course.

THE INSTRUCTOR: Please comment on the strengths and weakness of the instructor. Would you take another course from this instructor?

Thank you!



STUDENT OPINION OF FACULTY INSTRUCTION

Please share your honest reactions about this course. We appreciate the time you will take to respond to this evaluation. All responses will be carefully considered and kept confidential. Responses will not be read until after final grades have been submitted.

CIS 410
Course Subject and Number
Suprta Gurajala
Instructor

Networks
Course Title
Spring 2019
Semester and Year

INSTRUCTIONS

- Do NOT use ink or ballpoint pen.
- Completely fill circle with dark mark.
- Cleanly erase any answers you wish to change.



No. 2 Pencil Only

RIGHT MARK

WRONG MARKS



DEMOGRAPHIC QUESTIONS

Gender:

- ☒ Male
☐ Female

Reason for taking the course (complete all that apply):

- ☒ Major-required
☒ Major-elective
☐ Minor-required
☐ Minor-elective
☐ General Education Requirement
☐ Free Elective

Class Year:

- ☐ Freshman
☐ Sophomore
☐ Junior
☒ Senior
☐ Graduate
☐ Other

STUDENT SELF-EVALUATION QUESTIONS

Optional Items

Expected grade:

4.0 3.7 3.3 3.0 2.7 2.3 2.0 1.7 1.3 1.0 0.0 S U
☐ ☐ ☐ ☒ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

I attended class:

Always Frequently Moderately Occasionally Rarely
☒ ☐ ☐ ☐ ☐

How many hours outside of class did you devote to this course on average per week?

9+ 6-8 4-5 2-3 0-1
☐ ☒ ☐ ☐ ☐

Rate the level of your participation in this course.

Very active Moderate Not active
☐ ☒ ☐ ☐ ☐

What overall rating would you give yourself as a student in this course?

Excellent Good Adequate Poor Very Poor
☐ ☒ ☐ ☐ ☐

A. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

B. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

C. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

D. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

E. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

F. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

G. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

H. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

I. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

J. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

INSTRUCTOR EVALUATION QUESTIONS

Please rate the instructor on a 1–5 scale for each of the numbered questions or indicate that it does not apply.

	Does not apply	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1. The instructor demonstrates competence in the subject area.	<input type="radio"/>	<input type="radio"/> 1	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
2. The instructor's teaching is effective.	<input type="radio"/>	<input type="radio"/> 1	<input type="radio"/> 2	<input checked="" type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
3. The instructor is concerned with students' progress in the course.	<input type="radio"/>	<input type="radio"/> 1	<input type="radio"/> 2	<input checked="" type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
4. The instructor is available to students outside of class.	<input type="radio"/>	<input type="radio"/> 1	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
5. Examinations relate well to the stated course objectives.	<input type="radio"/>	<input type="radio"/> 1	<input type="radio"/> 2	<input checked="" type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
6. The work required in this course relates well to the stated course objectives.	<input type="radio"/>	<input type="radio"/> 1	<input type="radio"/> 2	<input checked="" type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
7. The instructor evaluates student performance fairly.	<input type="radio"/>	<input type="radio"/> 1	<input type="radio"/> 2	<input checked="" type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
8. I learned a great deal in this course.	<input type="radio"/>	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input checked="" type="radio"/> 4	<input type="radio"/> 5

OVERALL RATING OF INSTRUCTOR

Excellent	Good	Adequate	Poor	Very Poor
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

GENERAL COMMENTS

THE COURSE: Please comment on course content, requirements or any other aspect of the course.

Review the day before a test or a quiz would have greatly impacted my grade. Felt like there was stuff I had never seen before.

THE INSTRUCTOR: Please comment on the strengths and weakness of the instructor. Would you take another course from this instructor?

Yes

Thank you!



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St. Lawrence Academy • 1816

STUDENT OPINION OF FACULTY INSTRUCTION

Please share your honest reactions about this course. We appreciate the time you will take to respond to this evaluation. All responses will be carefully considered and kept confidential. Responses will not be read until after final grades have been submitted.

CIS 416-01
Course Subject and Number

Computer Networks
Course Title

Suparna Chakrabarti
Instructor

Spring 2018
Semester and Year

INSTRUCTIONS

- Do NOT use ink or ballpoint pen.
- Completely fill circle with dark mark.
- Cleanly erase any answers you wish to change.



No. 2 Pencil Only

RIGHT MARK

WRONG MARKS



DEMOGRAPHIC QUESTIONS

Gender:

- ☒ Male
☐ Female

Reason for taking the course (complete all that apply):

- ☒ Major-required
☐ Major-elective
☐ Minor-required
☐ Minor-elective
☐ General Education Requirement
☐ Free Elective

Class Year:

- ☐ Freshman
☐ Sophomore
☒ Junior
☐ Senior
☐ Graduate
☐ Other

STUDENT SELF-EVALUATION QUESTIONS

Optional Items

Expected grade:

4.0 3.7 3.3 3.0 2.7 2.3 2.0 1.7 1.3 1.0 0.0 S U
☐ ☐ ☐ ☒ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

I attended class:

Always Frequently Moderately Occasionally Rarely
☒ ☐ ☐ ☐ ☐

How many hours outside of class did you devote to this course on average per week?

9+ 6-8 4-5 2-3 0-1
☐ ☐ ☒ ☐ ☐

Rate the level of your participation in this course.

Very active Moderate Not active
☐ ☐ ☒ ☐ ☐

What overall rating would you give yourself as a student in this course?

Excellent Good Adequate Poor Very Poor
☐ ☒ ☐ ☐ ☐

A. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

B. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

C. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

D. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

E. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

F. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

G. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

H. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

I. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

J. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

INSTRUCTOR EVALUATION QUESTIONS

Please rate the instructor on a 1–5 scale for each of the numbered questions or indicate that it does not apply.

1. The instructor demonstrates competence in the subject area.
2. The instructor's teaching is effective.
3. The instructor is concerned with students' progress in the course.
4. The instructor is available to students outside of class.
5. Examinations relate well to the stated course objectives.
6. The work required in this course relates well to the stated course objectives.
7. The instructor evaluates student performance fairly.
8. I learned a great deal in this course.

Does not
apply

Strongly Agree

Agree

Neutral

Disagree
Strongly Disagree

<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

OVERALL RATING OF INSTRUCTOR

Excellent

Good

Adequate

Poor

Very Poor

☒☐☐☐☐

GENERAL COMMENTS

THE COURSE: Please comment on course content, requirements or any other aspect of the course.

THE INSTRUCTOR: Please comment on the strengths and weakness of the instructor. Would you take another course from this instructor?

Thank you!



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STUDENT OPINION OF FACULTY INSTRUCTION

Please share your honest reactions about this course. We appreciate the time you will take to respond to this evaluation. All responses will be carefully considered and kept confidential. Responses will not be read until after final grades have been submitted.

CIS 410
Course Subject and Number

Supraja Gurajala
Instructor

Computer Networks
Course Title

Spring 2018
Semester and Year

INSTRUCTIONS

- Do NOT use ink or ballpoint pen.
- Completely fill circle with dark mark.
- Cleanly erase any answers you wish to change.



No. 2 Pencil Only

RIGHT MARK

WRONG MARKS



DEMOGRAPHIC QUESTIONS

Gender:

- ☒ Male
☐ Female

Reason for taking the course (complete all that apply):

- ☐ Major-required
☒ Major-elective
☐ Minor-required
☐ Minor-elective
☐ General Education Requirement
☐ Free Elective

Class Year:

- ☐ Freshman
☐ Sophomore
☐ Junior
☒ Senior
☐ Graduate
☐ Other

STUDENT SELF-EVALUATION QUESTIONS

Optional Items

Expected grade:

4.0 3.7 3.3 3.0 2.7 2.3 2.0 1.7 1.3 1.0 0.0 | S U
☐ ☐ ☐ ☐ ☐ ☒ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

I attended class:

Always Frequently Moderately Occasionally Rarely
☐ ☐ ☒ ☐ ☐

How many hours outside of class did you devote to this course on average per week?

9+ 6-8 4-5 2-3 0-1
☐ ☐ ☒ ☐ ☐

Rate the level of your participation in this course.

Very active Moderate Not active
☐ ☐ ☒ ☐ ☐

What overall rating would you give yourself as a student in this course?

Excellent Good Adequate Poor Very Poor
☐ ☐ ☐ ☒ ☐

A. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

B. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

C. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

D. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

E. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

F. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

G. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

H. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

I. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

J. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

INSTRUCTOR EVALUATION QUESTIONS

Please rate the instructor on a 1–5 scale for each of the numbered questions or indicate that it does not apply.

1. The instructor demonstrates competence in the subject area.
2. The instructor's teaching is effective.
3. The instructor is concerned with students' progress in the course.
4. The instructor is available to students outside of class.
5. Examinations relate well to the stated course objectives.
6. The work required in this course relates well to the stated course objectives.
7. The instructor evaluates student performance fairly.
8. I learned a great deal in this course.

Does not apply	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="radio"/>	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	
<input type="radio"/>	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	
<input type="radio"/>	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	
<input type="radio"/>	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	
<input type="radio"/>	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	
<input type="radio"/>	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	
<input type="radio"/>	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	
<input type="radio"/>	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	

OVERALL RATING OF INSTRUCTOR

Excellent

Good

Adequate

Poor

Very Poor



GENERAL COMMENTS

THE COURSE: Please comment on course content, requirements or any other aspect of the course.

THE INSTRUCTOR: Please comment on the strengths and weakness of the instructor. Would you take another course from this instructor?

Thank you!



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STUDENT OPINION OF FACULTY INSTRUCTION

Please share your honest reactions about this course. We appreciate the time you will take to respond to this evaluation. All responses will be carefully considered and kept confidential. Responses will not be read until after final grades have been submitted.

CIS 410
Course Subject and Number
Supraja Burasari
Instructor

Computer Networking
Course Title
Spring 2018
Semester and Year

INSTRUCTIONS

- Do NOT use ink or ballpoint pen.
- Completely fill circle with dark mark.
- Cleanly erase any answers you wish to change.



No. 2 Pencil Only

RIGHT MARK

WRONG MARKS



DEMOGRAPHIC QUESTIONS

Gender:

- ☒ Male
☐ Female

Reason for taking the course (complete all that apply):

- ☒ Major-required
☐ Major-elective
☐ Minor-required
☐ Minor-elective
☐ General Education Requirement
☐ Free Elective

Class Year:

- ☐ Freshman
☒ Sophomore
☐ Junior
☐ Senior
☐ Graduate
☐ Other

STUDENT SELF-EVALUATION QUESTIONS

Optional Items

Expected grade:

4.0 3.7 3.3 3.0 2.7 2.3 2.0 1.7 1.3 1.0 0.0 S U
☐ ☐ ☒ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

I attended class:

Always Frequently Moderately Occasionally Rarely
☒ ☐ ☐ ☐ ☐

How many hours outside of class did you devote to this course on average per week?

9+ 6-8 4-5 2-3 0-1
☐ ☐ ☒ ☐ ☐

Rate the level of your participation in this course.

Very active Moderate Not active
☐ ☐ ☒ ☐

What overall rating would you give yourself as a student in this course?

Excellent Good Adequate Poor Very Poor
☐ ☒ ☐ ☐ ☐

A. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

B. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

C. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

D. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

E. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

F. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

G. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

H. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

I. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

J. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

INSTRUCTOR EVALUATION QUESTIONS

Please rate the instructor on a 1–5 scale for each of the numbered questions or indicate that it does not apply.

1. The instructor demonstrates competence in the subject area.
2. The instructor's teaching is effective.
3. The instructor is concerned with students' progress in the course.
4. The instructor is available to students outside of class.
5. Examinations relate well to the stated course objectives.
6. The work required in this course relates well to the stated course objectives.
7. The instructor evaluates student performance fairly.
8. I learned a great deal in this course.

Does not apply	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input type="radio"/> 2	<input checked="" type="radio"/>	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input checked="" type="radio"/>	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input type="radio"/> 2	<input checked="" type="radio"/>	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input checked="" type="radio"/>	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input checked="" type="radio"/>	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5

OVERALL RATING OF INSTRUCTOR

Excellent

Good

Adequate

Poor

Very Poor



GENERAL COMMENTS

THE COURSE: Please comment on course content, requirements or any other aspect of the course.

Personally, I think the course should focus
on not more on network security.
I wish we had more time for it.

THE INSTRUCTOR: Please comment on the strengths and weakness of the instructor. Would you take another course from this instructor?

I would take another course with the
instructor. I feel as though we
moved a bit to fast in the
particular course.

Thank you!



STUDENT OPINION OF FACULTY INSTRUCTION

Please share your honest reactions about this course. We appreciate the time you will take to respond to this evaluation. All responses will be carefully considered and kept confidential. Responses will not be read until after final grades have been submitted.

CIS 410 - 01

Course Subject and Number

Supraja Gurudala

Instructor

Computer Networks

Course Title

Spring 2018

Semester and Year

INSTRUCTIONS

- Do NOT use ink or ballpoint pen.
- Completely fill circle with dark mark.
- Cleanly erase any answers you wish to change.



No. 2 Pencil Only

RIGHT MARK

WRONG MARKS



DEMOGRAPHIC QUESTIONS

Gender:

- ☐ Male
☐ Female

Reason for taking the course (complete all that apply):

- ☒ Major-required
☐ Major-elective
☐ Minor-required
☐ Minor-elective
☐ General Education Requirement
☐ Free Elective

Class Year:

- ☐ Freshman
☐ Sophomore
☐ Junior
☐ Senior
☐ Graduate
☐ Other

STUDENT SELF-EVALUATION QUESTIONS

Optional Items

Expected grade:

4.0 3.7 3.3 3.0 2.7 2.3 2.0 1.7 1.3 1.0 0.0 S U
☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☒ ☐ ☐ ☐ ☐

I attended class:

Always Frequently Moderately Occasionally Rarely
☐ ☐ ☒ ☐ ☐

How many hours outside of class did you devote to this course on average per week?

9+ 6-8 4-5 2-3 0-1
☐ ☐ ☐ ☒ ☐

Rate the level of your participation in this course.

Very active Moderate Not active
☐ ☐ ☒ ☐ ☐

What overall rating would you give yourself as a student in this course?

Excellent Good Adequate Poor Very Poor
☐ ☐ ☐ ☐ ☒

A. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

B. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

C. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

D. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

E. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

F. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

G. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

H. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

I. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

J. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

INSTRUCTOR EVALUATION QUESTIONS

Please rate the instructor on a 1–5 scale for each of the numbered questions or indicate that it does not apply.

1. The instructor demonstrates competence in the subject area.
2. The instructor's teaching is effective.
3. The instructor is concerned with students' progress in the course.
4. The instructor is available to students outside of class.
5. Examinations relate well to the stated course objectives.
6. The work required in this course relates well to the stated course objectives.
7. The instructor evaluates student performance fairly.
8. I learned a great deal in this course.

Does not apply	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5

OVERALL RATING OF INSTRUCTOR

Excellent	Good	Adequate	Poor	Very Poor
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

GENERAL COMMENTS

THE COURSE: Please comment on course content, requirements or any other aspect of the course.

THE INSTRUCTOR: Please comment on the strengths and weakness of the instructor. Would you take another course from this instructor?

Thank you!



STUDENT OPINION OF FACULTY INSTRUCTION

Please share your honest reactions about this course. We appreciate the time you will take to respond to this evaluation. All responses will be carefully considered and kept confidential. Responses will not be read until after final grades have been submitted.

CIS 410
Course Subject and Number
Gurajala, Supraja
Instructor

Computer Networks
Course Title
Spring 2018
Semester and Year

INSTRUCTIONS

- Do NOT use ink or ballpoint pen.
- Completely fill circle with dark mark.
- Cleanly erase any answers you wish to change.



No. 2 Pencil Only

RIGHT MARK



WRONG MARKS



DEMOGRAPHIC QUESTIONS

Gender:

- ☒ Male
☐ Female

Reason for taking the course (complete all that apply):

- ☒ Major-required
☐ Major-elective
☐ Minor-required
☐ Minor-elective
☐ General Education Requirement
☐ Free Elective

Class Year:

- ☐ Freshman
☐ Sophomore
☐ Junior
☒ Senior
☐ Graduate
☐ Other

STUDENT SELF-EVALUATION QUESTIONS

Optional Items

Expected grade:

4.0 3.7 3.3 3.0 2.7 2.3 2.0 1.7 1.3 1.0 0.0 | S U
☐ ☐ ☐ ☐ ☒ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

I attended class:

Always Frequently Moderately Occasionally Rarely
☒ ☐ ☐ ☐ ☐

How many hours outside of class did you devote to this course on average per week?

9+ 6-8 4-5 2-3 0-1
☐ ☐ ☐ ☒ ☐

Rate the level of your participation in this course.

Very active Moderate Not active
☐ ☐ ☒ ☐ ☐

What overall rating would you give yourself as a student in this course?

Excellent Good Adequate Poor Very Poor
☐ ☒ ☐ ☐ ☐

A. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

B. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

C. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

D. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

E. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

F. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

G. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

H. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

I. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

J. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

INSTRUCTOR EVALUATION QUESTIONS

Please rate the instructor on a 1–5 scale for each of the numbered questions or indicate that it does not apply.

1. The instructor demonstrates competence in the subject area.
2. The instructor's teaching is effective.
3. The instructor is concerned with students' progress in the course.
4. The instructor is available to students outside of class.
5. Examinations relate well to the stated course objectives.
6. The work required in this course relates well to the stated course objectives.
7. The instructor evaluates student performance fairly.
8. I learned a great deal in this course.

Does not apply	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5

OVERALL RATING OF INSTRUCTOR

Excellent

Good

Adequate

Poor

Very Poor

☒☐☐☐☐

GENERAL COMMENTS

THE COURSE: Please comment on course content, requirements or any other aspect of the course.

THE INSTRUCTOR: Please comment on the strengths and weakness of the instructor. Would you take another course from this instructor?

Thank you!



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STUDENT OPINION OF FACULTY INSTRUCTION

Please share your honest reactions about this course. We appreciate the time you will take to respond to this evaluation. All responses will be carefully considered and kept confidential. Responses will not be read until after final grades have been submitted.

CIS 410

Course Subject and Number

Gurajala
Instructor

Computer networks

Course Title

Spring 2018
Semester and Year

INSTRUCTIONS

- Do NOT use ink or ballpoint pen.
- Completely fill circle with dark mark.
- Cleanly erase any answers you wish to change.



No. 2 Pencil Only

RIGHT MARK

WRONG MARKS



DEMOGRAPHIC QUESTIONS

Gender:

- ☒ Male
☐ Female

Reason for taking the course (complete all that apply):

- ☒ Major-required
☐ Major-elective
☐ Minor-required
☐ Minor-elective
☐ General Education Requirement
☐ Free Elective

Class Year:

- ☐ Freshman
☐ Sophomore
☐ Junior
☒ Senior
☐ Graduate
☐ Other

STUDENT SELF-EVALUATION QUESTIONS

Optional Items

Expected grade:

4.0 3.7 3.3 3.0 2.7 2.3 2.0 1.7 1.3 1.0 0.0 S U
☐ ☐ ☐ ☐ ☐ ☐ ☒ ☐ ☐ ☐ ☐ ☐ ☐ ☐

I attended class:

Always Frequently Moderately Occasionally Rarely
☐ ☐ ☒ ☐ ☐

How many hours outside of class did you devote to this course on average per week?

9+ 6-8 4-5 2-3 0-1
☐ ☐ ☐ ☒ ☐

Rate the level of your participation in this course.

Very active Moderate Not active
☐ ☐ ☒ ☐

What overall rating would you give yourself as a student in this course?

Excellent Good Adequate Poor Very Poor
☐ ☐ ☐ ☒ ☐

A. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

B. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

C. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

D. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

E. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

F. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

G. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

H. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

I. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

J. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

INSTRUCTOR EVALUATION QUESTIONS

Please rate the instructor on a 1–5 scale for each of the numbered questions or indicate that it does not apply.

1. The instructor demonstrates competence in the subject area.
2. The instructor's teaching is effective.
3. The instructor is concerned with students' progress in the course.
4. The instructor is available to students outside of class.
5. Examinations relate well to the stated course objectives.
6. The work required in this course relates well to the stated course objectives.
7. The instructor evaluates student performance fairly.
8. I learned a great deal in this course.

Does not apply	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="radio"/>	<input type="radio"/> 1	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5

OVERALL RATING OF INSTRUCTOR

Excellent	Good	Adequate	Poor	Very Poor
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

GENERAL COMMENTS

THE COURSE: Please comment on course content, requirements or any other aspect of the course.

THE INSTRUCTOR: Please comment on the strengths and weakness of the instructor. Would you take another course from this instructor?

Thank you!



STUDENT OPINION OF FACULTY INSTRUCTION

Please share your honest reactions about this course. We appreciate the time you will take to respond to this evaluation. All responses will be carefully considered and kept confidential. Responses will not be read until after final grades have been submitted.

CIS W10
Course Subject and Number

computer networks
Course Title

Supriya Guregalo
Instructor

Spring 2018
Semester and Year

INSTRUCTIONS

- Do NOT use ink or ballpoint pen.
- Completely fill circle with dark mark.
- Cleanly erase any answers you wish to change.



No. 2 Pencil Only

RIGHT MARK

WRONG MARKS



DEMOGRAPHIC QUESTIONS

Gender:

- ☐ Male
☐ Female

Reason for taking the course (complete all that apply):

- ☐ Major-required
☒ Major-elective
☐ Minor-required
☐ Minor-elective
☐ General Education Requirement
☐ Free Elective

Class Year:

- ☐ Freshman
☒ Sophomore
☐ Junior
☐ Senior
☐ Graduate
☐ Other

STUDENT SELF-EVALUATION QUESTIONS

Optional Items

Expected grade:

4.0 3.7 3.3 3.0 2.7 2.3 2.0 1.7 1.3 1.0 0.0 S U
☐ ☐ ☒ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

I attended class:

Always Frequently Moderately Occasionally Rarely
☒ ☐ ☐ ☐ ☐

How many hours outside of class did you devote to this course on average per week?

9+ 6-8 4-5 2-3 0-1
☐ ☐ ☒ ☐ ☐

Rate the level of your participation in this course.

Very active Moderate Not active
☐ ☐ ☒ ☐ ☐

What overall rating would you give yourself as a student in this course?

Excellent Good Adequate Poor Very Poor
☐ ☒ ☐ ☐ ☐

A. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

B. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

C. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

D. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

E. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

F. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

G. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

H. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

I. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

J. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

INSTRUCTOR EVALUATION QUESTIONS

Please rate the instructor on a 1-5 scale for each of the numbered questions or indicate that it does not apply.

1. The instructor demonstrates competence in the subject area.
2. The instructor's teaching is effective.
3. The instructor is concerned with students' progress in the course.
4. The instructor is available to students outside of class.
5. Examinations relate well to the stated course objectives.
6. The work required in this course relates well to the stated course objectives.
7. The instructor evaluates student performance fairly.
8. I learned a great deal in this course.

Does not apply	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5

OVERALL RATING OF INSTRUCTOR

Excellent

Good

Adequate

Poor

Very Poor



GENERAL COMMENTS

THE COURSE: Please comment on course content, requirements or any other aspect of the course.

THE INSTRUCTOR: Please comment on the strengths and weakness of the instructor. Would you take another course from this instructor?

for me she is the best in the CIS department.

she explain everything clear, and evaluate her

class fairly

Thank you!



STUDENT OPINION OF FACULTY INSTRUCTION

Please share your honest reactions about this course. We appreciate the time you will take to respond to this evaluation. All responses will be carefully considered and kept confidential. Responses will not be read until after final grades have been submitted.

Course Subject and Number
CIS 410

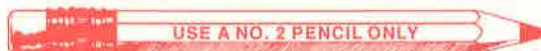
Course Title
Computer Networks

Instructor
Gurajala

Semester and Year
Spring 2018

INSTRUCTIONS

- Do NOT use ink or ballpoint pen.
- Completely fill circle with dark mark.
- Cleanly erase any answers you wish to change.



No. 2 Pencil Only

RIGHT MARK

WRONG MARKS



DEMOGRAPHIC QUESTIONS

Gender:

- ☐ Male
☒ Female

Reason for taking the course (complete all that apply):

- ☒ Major-required
☐ Major-elective
☐ Minor-required
☐ Minor-elective
☐ General Education Requirement
☐ Free Elective

Class Year:

- ☐ Freshman
☐ Sophomore
☐ Junior
☒ Senior
☐ Graduate
☐ Other

STUDENT SELF-EVALUATION QUESTIONS

Optional Items

Expected grade:

4.0 3.7 3.3 3.0 2.7 2.3 2.0 1.7 1.3 1.0 0.0 S U
☐ ☐ ☒ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

I attended class:

Always Frequently Moderately Occasionally Rarely
☐ ☐ ☒ ☐ ☐

How many hours outside of class did you devote to this course on average per week?

9+ 6-8 4-5 2-3 0-1
☐ ☒ ☐ ☐ ☐

Rate the level of your participation in this course.

Very active Moderate Not active
☐ ☐ ☒ ☐ ☐

What overall rating would you give yourself as a student in this course?

Excellent Good Adequate Poor Very Poor
☐ ☐ ☒ ☐ ☐

A. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

B. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

C. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

D. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

E. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

F. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

G. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

H. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

I. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

J. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

INSTRUCTOR EVALUATION QUESTIONS

Please rate the instructor on a 1-5 scale for each of the numbered questions or indicate that it does not apply.

1. The instructor demonstrates competence in the subject area.
2. The instructor's teaching is effective.
3. The instructor is concerned with students' progress in the course.
4. The instructor is available to students outside of class.
5. Examinations relate well to the stated course objectives.
6. The work required in this course relates well to the stated course objectives.
7. The instructor evaluates student performance fairly.
8. I learned a great deal in this course.

Does not apply	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5

OVERALL RATING OF INSTRUCTOR

Excellent

Good

Adequate

Poor

Very Poor



GENERAL COMMENTS

THE COURSE: Please comment on course content, requirements or any other aspect of the course.

would have liked labs with wireshark instead of geni maybe.

THE INSTRUCTOR: Please comment on the strengths and weakness of the instructor. Would you take another course from this instructor?

yes, I would. Included helpful worksheets + presented material in very organized + clear manner. Open to questions and willing to explain or elaborate on background information.

Thank you!



S · U · N · Y
POTSDAM
ST. LAWRENCE ACADEMY • 1816

STUDENT OPINION OF FACULTY INSTRUCTION

Please share your honest reactions about this course. We appreciate the time you will take to respond to this evaluation. All responses will be carefully considered and kept confidential. Responses will not be read until after final grades have been submitted.

CIS 410 01
Course Subject and Number
Supraya Gurnajala
Instructor

Computer Networks
Course Title
Spring 2018
Semester and Year

INSTRUCTIONS

- Do NOT use ink or ballpoint pen.
- Completely fill circle with dark mark.
- Cleanly erase any answers you wish to change.



No. 2 Pencil Only

RIGHT MARK

WRONG MARKS



DEMOGRAPHIC QUESTIONS

Gender:

- ☒ Male
☐ Female

Reason for taking the course (complete all that apply):

- ☒ Major-required
☐ Major-elective
☐ Minor-required
☐ Minor-elective
☐ General Education Requirement
☐ Free Elective

Class Year:

- ☐ Freshman
☐ Sophomore
☒ Junior
☐ Senior
☐ Graduate
☐ Other

STUDENT SELF-EVALUATION QUESTIONS

Optional Items

Expected grade:

4.0 3.7 3.3 3.0 2.7 2.3 2.0 1.7 1.3 1.0 0.0 S U
☐ ☐ ☐ ☐ ☐ ☒ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

I attended class:

Always Frequently Moderately Occasionally Rarely
☒ ☐ ☐ ☐ ☐

How many hours outside of class did you devote to this course on average per week?

9+ 6-8 4-5 2-3 0-1
☐ ☒ ☐ ☐ ☐

Rate the level of your participation in this course.

Very active Moderate Not active
☐ ☐ ☒ ☐ ☐

What overall rating would you give yourself as a student in this course?

Excellent Good Adequate Poor Very Poor
☐ ☐ ☒ ☐ ☐

A. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

B. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

C. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

D. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

E. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

F. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

G. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

H. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

I. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

J. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

INSTRUCTOR EVALUATION QUESTIONS

Please rate the instructor on a 1-5 scale for each of the numbered questions or indicate that it does not apply.

1. The instructor demonstrates competence in the subject area.
2. The instructor's teaching is effective.
3. The instructor is concerned with students' progress in the course.
4. The instructor is available to students outside of class.
5. Examinations relate well to the stated course objectives.
6. The work required in this course relates well to the stated course objectives.
7. The instructor evaluates student performance fairly.
8. I learned a great deal in this course.

Does not apply	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="radio"/>	<input type="radio"/> 1	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input type="radio"/> 2	<input checked="" type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input type="radio"/> 2	<input checked="" type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5

OVERALL RATING OF INSTRUCTOR

Excellent	Good	Adequate	Poor	Very Poor
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

GENERAL COMMENTS

THE COURSE: Please comment on course content, requirements or any other aspect of the course.

THE INSTRUCTOR: Please comment on the strengths and weakness of the instructor. Would you take another course from this instructor?

Thank you!



S · U · N · Y
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STUDENT OPINION OF FACULTY INSTRUCTION

Please share your honest reactions about this course. We appreciate the time you will take to respond to this evaluation. All responses will be carefully considered and kept confidential. Responses will not be read until after final grades have been submitted.

Course Subject and Number
LIS 410

Instructor
Supriya Gurajala

Course Title
Computer Networking

Semester and Year
Spring 2018

INSTRUCTIONS

- Do NOT use ink or ballpoint pen.
- Completely fill circle with dark mark.
- Cleanly erase any answers you wish to change.



No. 2 Pencil Only

RIGHT MARK

WRONG MARKS



DEMOGRAPHIC QUESTIONS

Gender:

- ☒ Male
☐ Female

Reason for taking the course (complete all that apply):

- ☒ Major-required
☐ Major-elective
☐ Minor-required
☐ Minor-elective
☐ General Education Requirement
☐ Free Elective

Class Year:

- ☐ Freshman
☐ Sophomore
☒ Junior
☐ Senior
☐ Graduate
☐ Other

STUDENT SELF-EVALUATION QUESTIONS

Optional Items

Expected grade:

4.0 3.7 3.3 3.0 2.7 2.3 2.0 1.7 1.3 1.0 0.0 S U
☐ ☐ ☐ ☐ ☒ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

I attended class:

Always Frequently Moderately Occasionally Rarely
☐ ☐ ☒ ☐ ☐

How many hours outside of class did you devote to this course on average per week?

9+ 6-8 4-5 2-3 0-1
☐ ☐ ☐ ☒ ☐

Rate the level of your participation in this course.

Very active Moderate Not active
☐ ☐ ☒ ☐

What overall rating would you give yourself as a student in this course?

Excellent Good Adequate Poor Very Poor
☐ ☐ ☐ ☒ ☐

A. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

B. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

C. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

D. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

E. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

F. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

G. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

H. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

I. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

J. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

INSTRUCTOR EVALUATION QUESTIONS

Please rate the instructor on a 1–5 scale for each of the numbered questions or indicate that it does not apply.

1. The instructor demonstrates competence in the subject area.
2. The instructor's teaching is effective.
3. The instructor is concerned with students' progress in the course.
4. The instructor is available to students outside of class.
5. Examinations relate well to the stated course objectives.
6. The work required in this course relates well to the stated course objectives.
7. The instructor evaluates student performance fairly.
8. I learned a great deal in this course.

Does not apply	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="radio"/>	<input type="radio"/> 1	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input type="radio"/> 2	<input checked="" type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5

OVERALL RATING OF INSTRUCTOR

Excellent	Good	Adequate	Poor	Very Poor
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

GENERAL COMMENTS

THE COURSE: Please comment on course content, requirements or any other aspect of the course.

THE INSTRUCTOR: Please comment on the strengths and weakness of the instructor. Would you take another course from this instructor?

She's very good, sometimes talks really fast which makes it hard to stay with her, partially due to classes being cancelled and needing to pick up pace

Thank you!



STUDENT OPINION OF FACULTY INSTRUCTION

Please share your honest reactions about this course. We appreciate the time you will take to respond to this evaluation. All responses will be carefully considered and kept confidential. Responses will not be read until after final grades have been submitted.

CIS 410 - 01
Course Subject and Number
Supraja Gurajala
Instructor

Computer Networks
Course Title
Spring 2018
Semester and Year

INSTRUCTIONS

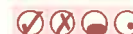
- Do NOT use ink or ballpoint pen.
- Completely fill circle with dark mark.
- Cleanly erase any answers you wish to change.



No. 2 Pencil Only

RIGHT MARK

WRONG MARKS



DEMOGRAPHIC QUESTIONS

Gender:

- ☒ Male
☐ Female

Reason for taking the course (complete all that apply):

- ☐ Major-required
☒ Major-elective
☐ Minor-required
☐ Minor-elective
☐ General Education Requirement
☐ Free Elective

Class Year:

- ☐ Freshman
☒ Sophomore
☐ Junior
☐ Senior
☐ Graduate
☐ Other

STUDENT SELF-EVALUATION QUESTIONS

Optional Items

Expected grade:

4.0 3.7 3.3 3.0 2.7 2.3 2.0 1.7 1.3 1.0 0.0 S U
☐ ☐ ☐ ☐ ☐ ☐ ☒ ☐ ☐ ☐ ☐ ☐ ☐ ☐

I attended class:

Always Frequently Moderately Occasionally Rarely
☒ ☐ ☐ ☐ ☐

How many hours outside of class did you devote to this course on average per week?

9+ 6-8 4-5 2-3 0-1
☐ ☐ ☐ ☒ ☐

Rate the level of your participation in this course.

Very active Moderate Not active
☐ ☐ ☒ ☐ ☐

What overall rating would you give yourself as a student in this course?

Excellent Good Adequate Poor Very Poor
☐ ☒ ☐ ☐ ☐

A. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

B. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

C. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

D. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

E. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

F. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

G. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

H. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

I. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

J. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

INSTRUCTOR EVALUATION QUESTIONS

Please rate the instructor on a 1–5 scale for each of the numbered questions or indicate that it does not apply.

1. The instructor demonstrates competence in the subject area.
2. The instructor's teaching is effective.
3. The instructor is concerned with students' progress in the course.
4. The instructor is available to students outside of class.
5. Examinations relate well to the stated course objectives.
6. The work required in this course relates well to the stated course objectives.
7. The instructor evaluates student performance fairly.
8. I learned a great deal in this course.

Does not apply	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input type="radio"/> 1	<input type="radio"/> 2	<input checked="" type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
<input type="radio"/>	<input checked="" type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5

OVERALL RATING OF INSTRUCTOR

Excellent

☐

Good

☒

Adequate

☐

Poor

☐

Very Poor

☐

GENERAL COMMENTS

THE COURSE: Please comment on course content, requirements or any other aspect of the course.

The course was fine, but some of the binary was confusing.

THE INSTRUCTOR: Please comment on the strengths and weakness of the instructor. Would you take another course from this instructor?

The professor would talk too fast sometimes and would be hard to follow. Other wise, the course wasn't bad and I will be taking more classes with the profesor

Thank you!



S · U · N · Y
POTSDAM
ST. LAWRENCE ACADEMY • 1816

STUDENT OPINION OF FACULTY INSTRUCTION

Please share your honest reactions about this course. We appreciate the time you will take to respond to this evaluation. All responses will be carefully considered and kept confidential. Responses will not be read until after final grades have been submitted.

CIS 410
Course Subject and Number

Supraga Gurajala
Instructor

Computer Networks
Course Title

Spring 2018
Semester and Year

INSTRUCTIONS

- Do NOT use ink or ballpoint pen.
- Completely fill circle with dark mark.
- Cleanly erase any answers you wish to change.



No. 2 Pencil Only

RIGHT MARK

WRONG MARKS



DEMOGRAPHIC QUESTIONS

Gender:

- ☐ Male
☒ Female

Reason for taking the course (complete all that apply):

- ☒ Major-required
☐ Major-elective
☐ Minor-required
☐ Minor-elective
☐ General Education Requirement
☐ Free Elective

Class Year:

- ☐ Freshman
☐ Sophomore
☒ Junior
☐ Senior
☐ Graduate
☐ Other

STUDENT SELF-EVALUATION QUESTIONS

Optional Items

Expected grade:

4.0 3.7 3.3 3.0 2.7 2.3 2.0 1.7 1.3 1.0 0.0 | S U
☐ ☐ ☒ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

I attended class:

Always Frequently Moderately Occasionally Rarely
☐ ☒ ☐ ☐ ☐

How many hours outside of class did you devote to this course on average per week?

9+ 6-8 4-5 2-3 0-1
☐ ☐ ☐ ☒ ☐

Rate the level of your participation in this course.

Very active Moderate Not active
☐ ☐ ☒ ☐

What overall rating would you give yourself as a student in this course?

Excellent Good Adequate Poor Very Poor
☐ ☒ ☐ ☐ ☐

A. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

B. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

C. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

D. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

E. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

F. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

G. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

H. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

I. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

J. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

INSTRUCTOR EVALUATION QUESTIONS

Please rate the instructor on a 1–5 scale for each of the numbered questions or indicate that it does not apply.

1. The instructor demonstrates competence in the subject area.
2. The instructor's teaching is effective.
3. The instructor is concerned with students' progress in the course.
4. The instructor is available to students outside of class.
5. Examinations relate well to the stated course objectives.
6. The work required in this course relates well to the stated course objectives.
7. The instructor evaluates student performance fairly.
8. I learned a great deal in this course.

Does not apply	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="radio"/>	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	
<input type="radio"/>	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	
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<input type="radio"/>	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	

OVERALL RATING OF INSTRUCTOR

Excellent

Good

Adequate

Poor

Very Poor



GENERAL COMMENTS

THE COURSE: Please comment on course content, requirements or any other aspect of the course.

There was a good amount of work in the class. Sometimes a little too much at a time but it was manageable.

THE INSTRUCTOR: Please comment on the strengths and weakness of the instructor. Would you take another course from this instructor?

Great professor, I don't have any opinions. I would take another course from this instructor.

Thank you!



S · U · N · Y
POTSDAM
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OVERALL RATING OF INSTRUCTOR

Excellent	Good	Adequate	Poor	Very Poor
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

GENERAL COMMENTS

THE COURSE: Please comment on course content, requirements or any other aspect of the course.

The course content is very thorough and I feel as though I understand networks much better than when I started the course.

THE INSTRUCTOR: Please comment on the strengths and weakness of the instructor. Would you take another course from this instructor?

Dr. Gurajala is good at breaking down diagrams and explaining things through picture. On the other hand she often goes over things very fast at times.

Thank you!