

Course Name:

Instructor:

Class Location:

DATE/Time:

Midterm Feedback Form: Groups

Participation in this survey is optional. Your responses to these questions are anonymous. The data collected in this form contain no personal information. The use of this data will be to provide feedback to the instructor of this course.

Thank you.

For each answer, please fill in marks like this: ● not like this: ✗

Table with 5 columns: Strongly Agree, Agree, Disagree, Strongly Disagree, Not Applicable. Rows 1-25 contain Likert scale items with response options 1-5.

Table with 5 columns: 1 hour or less, 2 hours, 3 hours, 4 hours, 5 hours or more. Row 26: The average number of hours per week that I spend on this course (outside of class) is about:

Table with 5 columns: Freshman, Sophomore, Junior, Senior, Graduate. Row 27: My classification is:

Table with 5 columns: Making a written summary, Engaging in a "hands-on" activity, Listening to a lecture, Reading something by myself, Exchanging ideas in a discussion. Row 28: I feel I learn best when I am:

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Open-ended Questions: Please Write Clearly in the box and press down hard

1. What is going well in this class? (i.e. what is helping you learn in this class?)

A large rectangular area defined by a dashed border, intended for the student's response to question 1.

2. What is the most important thing you are learning in this class?

A large rectangular area defined by a dashed border, intended for the student's response to question 2.

3. What specific suggestions do you have for the instructor?

A large rectangular area defined by a dashed border, intended for the student's response to question 3.