



Mark as shown: ☐ ☒ ☐ ☐ ☐ Please use a ball-point pen or a thin felt tip. This form will be processed automatically.

Correction: ☐ ☒ ☐ ☒ ☐ Please follow the examples shown on the left hand side to help optimize the reading results.

## 1. Default Survey Questions

Please complete this End of Course Evaluation regarding your experience in your class(es) at Nashville State. Your feedback and comments will remain anonymous. Your instructor will not see the survey results until after grades are due. On behalf of the Nashville State Community College faculty and staff, thank you for your participation!

- |     |   |  |  |                                    |
|-----|---|--|--|------------------------------------|
| 1.1 | The instructor provided options for me to connect with them in any of these ways: in person, virtually, email or other methods like phone/text. | <input type="checkbox"/> Always<br><input type="checkbox"/> Rarely | <input type="checkbox"/> Usually<br><input type="checkbox"/> Never | <input type="checkbox"/> Sometimes |
| 1.2 | The instructor responded when I contacted them.   | <input type="checkbox"/> Always<br><input type="checkbox"/> Rarely | <input type="checkbox"/> Usually<br><input type="checkbox"/> Never | <input type="checkbox"/> Sometimes |
| 1.3 | The instructor encouraged students to participate in class meetings and/or online discussions.  | <input type="checkbox"/> Always<br><input type="checkbox"/> Rarely | <input type="checkbox"/> Usually<br><input type="checkbox"/> Never | <input type="checkbox"/> Sometimes |
| 1.4 | The instructor gave clear explanations.   | <input type="checkbox"/> Always<br><input type="checkbox"/> Rarely | <input type="checkbox"/> Usually<br><input type="checkbox"/> Never | <input type="checkbox"/> Sometimes |
| 1.5 | The instructor explained what I did well and how I could improve.   | <input type="checkbox"/> Always<br><input type="checkbox"/> Rarely | <input type="checkbox"/> Usually<br><input type="checkbox"/> Never | <input type="checkbox"/> Sometimes |
| 1.6 | The instructor showed respect for students and their learning.  | <input type="checkbox"/> Always<br><input type="checkbox"/> Rarely | <input type="checkbox"/> Usually<br><input type="checkbox"/> Never | <input type="checkbox"/> Sometimes |
| 1.7 | I would recommend this instructor to a friend.  | <input type="checkbox"/> Always<br><input type="checkbox"/> Rarely | <input type="checkbox"/> Usually<br><input type="checkbox"/> Never | <input type="checkbox"/> Sometimes |

1.8 In what ways was this instructor effective?

1.9 In what ways could this instructor improve their communication or teaching?

- |      |   |  |  |                                    |
|------|---|--|--|------------------------------------|
| 1.10 | The learning outcomes for this course were clearly stated.                            | <input type="checkbox"/> Always<br><input type="checkbox"/> Rarely | <input type="checkbox"/> Usually<br><input type="checkbox"/> Never | <input type="checkbox"/> Sometimes |
| 1.11 | The course was organized in a way that helped me learn.                               | <input type="checkbox"/> Always<br><input type="checkbox"/> Rarely | <input type="checkbox"/> Usually<br><input type="checkbox"/> Never | <input type="checkbox"/> Sometimes |
| 1.12 | The course resources and/or assignments were helpful in learning the course material. | <input type="checkbox"/> Always<br><input type="checkbox"/> Rarely | <input type="checkbox"/> Usually<br><input type="checkbox"/> Never | <input type="checkbox"/> Sometimes |
| 1.13 | Grading policies for the course and assignments were clear.                           | <input type="checkbox"/> Always<br><input type="checkbox"/> Rarely | <input type="checkbox"/> Usually<br><input type="checkbox"/> Never | <input type="checkbox"/> Sometimes |

1. Default Survey Questions [Continue]

1.14 What aspects of this course helped me learn and why?

1.15 What aspects of this course need improvement and why?

|   |                                 |                                  |                                    |
|---|---------------------------------|----------------------------------|------------------------------------|
| 1.16 I completed assignments by the due date.   | <input type="checkbox"/> Always | <input type="checkbox"/> Usually | <input type="checkbox"/> Sometimes |
|   | <input type="checkbox"/> Rarely | <input type="checkbox"/> Never   |                                    |
| 1.17 I asked questions when I did not understand.   | <input type="checkbox"/> Always | <input type="checkbox"/> Usually | <input type="checkbox"/> Sometimes |
|   | <input type="checkbox"/> Rarely | <input type="checkbox"/> Never   |                                    |
| 1.18 I called, emailed, or visited my instructor in their office/virtual office when I needed help. | <input type="checkbox"/> Always | <input type="checkbox"/> Usually | <input type="checkbox"/> Sometimes |
|   | <input type="checkbox"/> Rarely | <input type="checkbox"/> Never   |                                    |

1.19 What will I do differently in my next term to strengthen my learning skills?