

**Osher Lifelong Learning Institute
COURSE EVALUATION**

NAME OF COURSE: _____

SEMESTER: _____

NAME OF INSTRUCTOR: _____

We rely on these evaluations to help us provide quality programming. Please give us your honest evaluation of both the course and instructor. If, for example, you enjoyed the course but have some suggestions that the instructor might use the next time s/he teaches, do not hesitate to pass along your ideas!

Evaluate the course according to this scale:

1 = Poor 2 = Satisfactory 3 = Average 4 = Good 5 = Excellent

INSTRUCTOR EVALUATION:

	1	2	3	4	5
Knowledge of the Subject	_____	_____	_____	_____	_____
Clarity and Method of Presentation	_____	_____	_____	_____	_____
Preparation and Organization	_____	_____	_____	_____	_____
Overall Rating of Instructor	_____	_____	_____	_____	_____

COURSE EVALUATION:

	1	2	3	4	5
Content	_____	_____	_____	_____	_____
Level of Intellectual Stimulation	_____	_____	_____	_____	_____
Degree to which course content matched course description	_____	_____	_____	_____	_____
Overall Rating of Course	_____	_____	_____	_____	_____

Number of sessions attended: _____

Please share your comments about this course.

If the course had more than one instructor please comment on the effectiveness of each.

Please share any suggestions to improve the course.

*Continued on the
reverse →*

Would you recommend this course to others? _____ Yes _____ No

Would you take another course related to this topic? _____ Yes _____ No

Do you have suggestions for a future course, lecture or study trip? If you wish to suggest someone who might teach or facilitate, please give their name and contact information.

Is this your first OLLI course?

If "Yes," how did you hear about the program?

Do you plan to take another course? _____ Yes _____ No

LONG-TERM IMPACT OF COURSE/PROGRAM:

Has OLLI had an impact on your overall quality of life? To help us assess whether the program provides long-term benefits, we seek general information on how OLLI participation has positively affected your life in a larger sense. For example, have OLLI courses impacted your physical health, mental well-being, financial well-being, or activity level? Have you developed new interests, begun to volunteer, or broadened your social circle? Any information you wish to share will be much appreciated.

How would you rate your overall OLLI experience (not just this class)?

1 = Poor 2 = Average 3 = Satisfactory 4 = Good 5 = Excellent

Please share any comments about your overall OLLI experience.

THANK YOU FOR COMPLETING THIS EVALUATION!!!

Name optional.

Rev. 1/18/17