

Students Feedback Form for Teachers

Instructor Name: _____

Course Title: _____

Semester: _____

Instructions:

Please provide honest feedback about the course and instructor. Your responses are confidential and will be used to improve the quality of instruction.

1. Clarity and Understandability

How clear and understandable were the lectures and presentations?

- Not clear at all
- Somewhat unclear
- Neutral
- Mostly clear
- Very clear

2. Engagement and Interaction

How engaging and interactive was the instructor during the course?

- Not engaging
- Rarely engaging
- Sometimes engaging
- Often engaging
- Always engaging

3. Accessibility and Support

How accessible and supportive was the instructor outside of lectures?

- Not accessible
- Rarely accessible

- Sometimes accessible
- Often accessible
- Always accessible

4. Use of Teaching Materials

How effectively did the instructor use teaching materials (e.g., textbooks, digital tools)?

- Not effective at all
- Slightly effective
- Moderately effective
- Very effective
- Extremely effective

5. Encouragement of Critical Thinking

How well did the instructor encourage critical thinking and problem solving?

- Not at all
- Rarely
- Sometimes
- Often
- Always

6. Overall Satisfaction

Overall, how satisfied are you with this instructor?

- Very dissatisfied
- Dissatisfied
- Neutral
- Satisfied
- Very satisfied

7. Open Feedback (Optional)

Please provide any additional comments or suggestions that may help improve this course and teaching methods.

Thank you for your feedback!